Transference and Associativity. Psychoanalysis and its Debate with Suggestion

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"On Beginning the Treatment" (Freud 1913c) is one of three papers that Freud wrote on the technique of psychoanalysis between 1913 and 1915, the other two being "Observations on Transference Love" (1915a [1914]) and "Remembering, Repeating and Working-Through" (1914g). Taken together, they are the most effective of Freud's attempts to define the essence of the psychoanalytic situation and the work of psychoanalysis.

By 1913, he already had sufficient experience of the practice of psychoanalysis to be able to take stock of its strategy and essential characteristics. He was refining his conception of narcissism in a way that would open up a new chapter in the exploration of the mind and its workings,¹ laying the foundations for what, in 1921, would be the analysis of the ego without falling into the trap of mere self-reference. As he was working on his theory of narcissism and the way in which this would help to identify narcissistic patterns, he undertook a series of reflexive and reflective reappraisals not only of the history of psychoanalysis (Freud 1914d) but also of its practical and theoretical aspects; this led him to envisage undertaking the colossal task of writing the fifteen papers on metapsychology that would provide an overall view of psychoanalysis and of its underlying theory.

The years 1913 to 1915 thus represent the first turning-point in the development of his thinking, probably indeed the first great reflexive/reflective moment of it. The three papers on psychoanalytic practice that I mentioned above are the technical side of this reappraisal; in them, Freud sums up the overall development of psychoanalysis and highlights the essential features of what that experience had taught him. The paper on remembering² and that on transference love highlight some specific issues in psychoanalytic treatment and what the psychoanalyst must do when these particular problems arise in the course of an

¹ In 1915 and 1916, he wrote two fundamental papers on the analysis of the impasses and paradoxes of narcissism – "Mourning and Melancholia" (1917e [1915]) and "Some Character-Types met with in Psycho-Analytic Work" (1916d), which represent a significant contribution to the analysis of various kinds of narcissistic pathology.
² For an analysis of that paper, see Roussillon (2010).
analysis. The issues raised in the paper on which I am at present focusing – that on beginning treatment – are different: the overall framework and central theme of that paper involve the general strategy that underlies the psychoanalytic method and the conditions under which it can be implemented.

The fundamental feature of the psychoanalytic method involves two closely-linked aspects: the reference to the transference, a precondition for any attempt at interpretation according to Freud, and the associativity of mental functioning as evidenced in the rule of free association.

**Analysis of the transference and the conditions under which this becomes possible**

The first fundamental concept is that of the transference. The work of psychoanalysis is based on transference. It is this and what it brings into the here-and-now situation of a given session that give weight to the process as a whole and ensure that the analysis will not be superficial – that it will not be an intellectual form of analysis, but will call upon affects and drive-related experiences, the necessary conditions for genuine change and transformation to take place thanks to the analysis.

“When are we to begin making our communications to the patient? […] The answer to this can only be: Not until an effective transference has been established in the patient, a proper rapport with him.” (Freud 1913c, p. 139)

There is also Freud's famous remark according to which “it is impossible to destroy anyone in absentia or in effigie” (Freud 1912b, p. 108); this makes it plain that, for any genuine transformation to occur, a given problem situation must be brought into the here-and-now of the transference.

The transference is therefore a precondition for the work of analysis. Its presence, its manifestations and its subsequent analysis draw the line between medical psychotherapies based on suggestion and psychoanalytic psychotherapy based on the analysis of the effects of suggestion linked to the impact of the transference on the way in which the analyst’s

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3 It is perhaps worthwhile reminding the reader that, for Freud, psychoanalysis did not stand in opposition to psychotherapy; in his view, psychoanalysis was a "psychoanalytic psychotherapy". The real difference, for him, was between psychotherapy based on analysis – and more specifically on the analysis of the transference – and those forms of psychotherapy that made use of suggestion as their principal means of treatment. Some degree of suggestion is unavoidable in
comments are received and integrated. That was also why Freud remained sceptical of any preliminary remark about what was going to take place in the course of an analysis – for example, what as yet inexperienced psychoanalysts may say about a transference love that is still to come. Freud did of course point out in his paper on transference love (1915a [1914]) that this is a product of the psychoanalytic situation – indeed, this is the very condition for its being interpreted. For it to be interpreted, as Freud himself pointed out, it must appear to be spontaneous. The psychoanalytic process takes place within this kind of paradoxical context; these paradoxes must be taken on board by both analyst and analysand if the persuasive effect of the work of the analysis is to be in any way convincing, thereby enabling the anticipated in-depth changes to take place.

This allows me to make a brief comment on Freud's famous idea according to which cure or recovery comes as a bonus, a remark which, in my opinion, has often been misunderstood. That declaration is sometimes – mistakenly – attributed to Lacan; Freud did not mean by it that psychoanalysis is not a kind of psychotherapy or that its aim has nothing to do with a therapeutic outcome – quite the contrary, in fact. He meant that going on with an analysis, without looking for any immediate relief from symptoms of the kind that suggestion aims to bring about, is the best way of treating the analysand's distress – it is the best kind of psychotherapy for this. Freud did not contrast psychotherapy with psychoanalysis, as is often the case nowadays; he drew a distinction between a flawed or superficial form of psychotherapy and a good-quality one which, through its in-depth work, can bring about lasting change. He explained that very appositely in his metaphor of the dog-race in which a sausage was thrown onto the track (1915a [1914], p. 169) – with the result that the dogs threw themselves upon it so as to have immediate satisfaction rather than focus on the much more enlarged satisfaction awaiting the winner of the race: a whole garland of sausages. Nevertheless, as I shall make clear later, when treatment is being set up, there are aspects of the psychoanalytic situation that have to be imposed from the outset; these have the unavoidable effect of "fatherly suggestion", as Ferenczi put it (Groddeck 1923, p. 266-267). In such situations, suggestion would seem to be unavoidable; one major aspect of the treatment will be to make it possible to go beyond

\[\text{psychoanalysis, all the more so in that it is linked to the transference and to the position in which transference phenomena place the psychoanalyst.}\]
that thanks to the work of the analysis. The initial suggestion will then be seen as an "advance" that enabled the analysis to take place, a necessary suggestion that facilitated the subsequent possibility to go beyond suggestion.

Transference, however, is not exclusive to the psychoanalytic situation. As Freud pointed out as early as 1912, it develops in the great majority of treatment situations. The capacity to set up a transference represents a general process of mental functioning and is one form of the "compulsion to repeat" (Freud 1914g). Nor is transference neurosis specific to psychoanalysis; each time that a transference is set up with respect to some institution or other (Freud spoke of the Church and the Army; we could probably add the family and any kind of treatment situation), a transference neurosis is or can be set up too.

What is specific to psychoanalysis is that it makes it possible to analyse the transference neurosis – it creates the conditions not only for that neurosis to be set up but also for it to be analysed. That was Freud's most fundamental response to the threat of suggestion that hangs over – and will never stop hanging over – psychoanalysis. The transference represents a fundamental threat to the veracity of the psychoanalytic process insofar as it is a factor of influence and suggestion. To counteract influence and suggestion, it is not enough simply to avoid giving advice or to refrain from making use of the suggestion impact common to "medical" psychotherapies (to use Freud's term) – that would simply be a matter of intentional self-control and will-power. That alone, however, would not do away with unconscious influencing and suggesting, since it applies only to the deliberate and intentional aspect of these. Suggestion and influence can have an impact that has nothing to do with the analyst's intentional decisions – they involve the manner in which the analyst's comments and responses are understood by the analysand; in other words, they involve the unconscious transference. That kind of suggestion, influence or even seduction cannot be countered simply by deciding to abstain intentionally from so responding; in order to go beyond the effect that it may have, the unconscious motives that underlie it have to be explored. This is one of the crucial issues at stake in the analysis of the transference – and that is why analysis of the transference is such an essential part of the definition of psychoanalysis when compared to other forms of psychotherapy based on suggestion; it is the dividing line between psychoanalytic psychotherapy and medical
psychotherapy. The fundamental issue is therefore that of the conditions that make analysis of the transference possible.

One set of conditions concerns what we might call the transference arena – the early manifestations of the transference, those which, in the preliminary interviews, tend to focus initially on the setting and on the concrete rules that govern the treatment. This led Freud to explore how, in setting up the psychoanalytic situation, these early manifestations of the transference could be overcome – those that focus on the situation itself and take the initial stages of the analysis as their chosen medium. Freud was always drawing attention to the question of how those elements that tended to take the psychoanalytic setting itself as a locus for the transference or its manifestation could be moved away from that particular dimension and brought, as far as possible, into the transference onto the analyst. However, when the treatment is being set up, it is with respect to the setting itself that the transference and resistances tend initially to be manifested. The strategy behind beginning the treatment – the “general plan of the game” (Freud 1913c, p. 123), as it were – consists in not allowing the transference to focus on that particular aspect. But how is this to be brought about, given that transference – and, more specifically, transference onto the analyst – is the very condition that determines the possibility of the analyst's interventions being in any way effective? Freud's idea was to combine two modes of intervention. On the one hand, certain specific aspects of the setting have quite simply to be imposed, the hope being that, with the evolution of the analytical process, that initial enforcement will be transformed into something more convincing, based on the analysand's ongoing experience of the analysis. Some things cannot be justified in advance (for example, matters concerning payment of the sessions: "My answer is: that's just the way it is"); they will become meaningful only through the treatment process itself and be felt to be valid thanks to an experience which, at that particular point, is still to come. This echoes what I said earlier about the "advance" that has to be granted initially to the analysis. At other times, Freud explained the essential reasons for such a setting, and the limitations placed on the analyst's prior knowledge. He did this, for example, with reference to Aesop's fable concerning the length of the Wayfarer's stride (1913c, p. 128) as an illustration of matters that have to do with the length of treatment in general. He did not, therefore, immediately interpret this kind of "resistance", because the necessary conditions for such an
interpretation to be effective were not yet in place. He imposed what could not be explained and explained what at that point could be – he made use both of coercion and of meaningfulness.

It was also for the analysis of the transference that he recommended that the analysand lie on the couch. His argument – which he did not share with his analysands – seemed initially to be a matter of personal comfort: he could not bear being looked at all day long by his patients. However, when he did get round to explaining why, it became clear that the real reason had to do with the analysis of the transference: on his face, in his gestures and movements, the analysand could "read" his reactions to what he or she was saying, and therefore adapt what was being said to the visible "responses" of the analyst. Whole chapters of associativity and transference processes might therefore be buried and prevented from being expressed. Here too, the actual setting is an attempt to offset any threat of unconscious or involuntary influence or suggestion coming from the analyst.

It was also so that transference feelings could be brought to the fore that Freud limited as much possible what we now call lateral transference. This represents a source of potential loss to the analysis of a whole aspect of the transference which is attempting to find another stage on which it can be played out. It should all the same be pointed out that what Freud meant by lateral transference was much more restrictive than the manner in which some contemporary psychoanalysts use the concept. For Freud, lateral transference was not just anything; it applied only to situations in which the analysand spoke about his or her analysis to some other person, reporting the sessions or duplicating, as it were, the analytical sessions with other "sessions" carried out with someone in his or her emotional environment.

At this point, it may well be worthwhile reminding the reader that Freud's definition of the transference was not limited to what transpired with the analyst and the psychoanalytic situation. This also is too often forgotten by contemporary psychoanalysts for whom the concept of the transference applies only to what transpires with the analyst. In "Remembering, Repeating and Working-Through", Freud wrote: “[…] the transference is itself only a piece of repetition, and […] the repetition is a transference of the forgotten past not only on to the doctor but also on to all the other aspects of the current situation.” (1914g, p. 151)
Summarizing the conditions under which the transference can be interpreted leads us naturally enough to evoke the rule of free association and, beyond that, associativity in general.

In the first place, the logic behind the fundamental rule is that of making it possible to interpret the transference; it therefore has to be expressed in words. How could we interpret what is not expressed (the transference and its historical sources) other than by means of what is expressed (its displacement and therefore its transference onto the present situation)? This implies the lifting of the various levels of censorship that apply to what can be expressed in words.

In addition – and this element was present from the very beginning in Freud's conception of the situation – there is an intrinsic and fundamental link between transference and associativity. In *The Interpretation of Dreams* (1900a), Freud points out that transference can be inferred whenever associativity breaks down or when resistance brings displacement and shifts in it. In that book, for example, Freud has this to say: “We learn […] that an unconscious idea is as such quite incapable of entering the preconscious and that it can only exercise any effect there by establishing a connection with an idea which already belongs to the preconscious, by transferring its intensity on to it and by getting itself ‘covered’ by it. Here we have the fact of ‘transference’, which provides an explanation of so many striking phenomena in the mental life of neurotics. The preconscious idea, which thus acquires an undeserved degree of intensity, may either be left unaltered by the transference, or it may have a modification forced upon it, derived from the content of the idea which effects the transference.” (op. cit., p. 562-3)

In the papers that he wrote between 1913 and 1915, Freud added to this central premise; he commented on several occasions that every breakdown in free associations should be seen as the result of some censorship being applied to the chain of associations or to some thought involving the analyst or the psychoanalytic situation. Transference and associativity are therefore linked closely together; the rule concerning free association is also a necessary condition for the interpretation of the transference, one of the ways in which the potential influence of the analyst can be circumvented. The idea of associativity opens up many more avenues for thinking, avenues that are to a large extent ignored by contemporary analysts for whom associativity is so well-known that it need no longer be
the subject of any exploration. Recalling the historical background to these issues may well be of some use, because, after all, that background is an essential feature of psychoanalysis – one that perhaps is not well enough known. It is essential in that it illustrates Freud's ongoing attempts to liberate psychoanalysis from the effects of suggestion that are part of the method itself. Free association and associativty are not prescribed by the analyst – or at least not only and not fundamentally by the analyst; they are above all modalities in which the mind itself functions. Their recommendation in psychoanalytic methodology aims simply to encourage free expression in the face of everything that in the past or in the present situation might obstruct its deployment; the objective is to free the analysand from the effect of past influences that might have had an impact on it.

**The fundamental rule and associativity**

When we examine in detail what Freud had to say about the origins, as he saw them, of the method that he invented, our attention is drawn to a short paper he wrote in 1920, "A Note on the Prehistory of the Technique of Analysis" (1920b). In that paper, he mentions the fact that, as a teenager, he had read the works of Ludwig Börne, a German writer of the Romantic Movement, and that this brought the idea of free association to his attention. In an essay entitled "The Art of Becoming an Original Writer in Three Days", Börne says that the "free association" method of writing is the key to what he does. In fact that method was invented by the followers of Mesmer and early spiritists of the clinic of the Chevalier de Barberin situated on the Croix Rousse hill in Lyons. The method was invented by two "artificial somnambulists" (called G. Rochette and The Unknown Agent) of that clinic, then brought via Masonic lodges to Strasbourg (Roussillon 1992), which at that time was the hub for everything that concerned Germany and the German Romantic Movement at the beginning of the 19th century.

As to the history of the link between associativity and clinical matters, it is in Freud's *On Aphasia* (1891b) that we first come across it. In that book, Freud's theory of psychical representation is based on his work on aphasia – a set of perceptual elements that are associated or connected together. The model that he presents is, it must be said, astonishingly modern and "neuroscientific" – it comes close, for example, to the model of
interconnected networks of representation (Varela 1989), and to that of groupings of neurones (Hebb 1949; Braitenberg & Schüz 1998).

In his famous "Project for a Scientific Psychology", Freud (1950a [1895]) continued his attempt to devise a model of the associative workings of the mind. In that paper, he refers explicitly to conditioned reflexes as a way of conceiving of how symptoms are generated – the "false connections" that lie at the heart of reminiscences come about through association by simultaneity or contiguity. Here again his model is a very modern one when we compare it, for example, with that of LeDoux (1996), in which conditioned reflexes are a fundamentally important feature of brain functioning, especially with respect to the emotions.

In that same paper, in his attempt to show how the ego functions, Freud again made use of associative functioning: the ego is a set of associated connections, of groupings that are themselves associative. He went on to say that some associations may be inhibited or hampered when primary defences ("fending off" [Freud 1950a (1895), p. 321]) are mobilized; this tends to block the associative movement between different parts of the ego. The ego is a set of complex inter-related elements, a set of associative groups or networks. It is important to realize that this model applies both to basic mental functioning and to pathological mental states: certain life events may fortuitously fixate a set of associated elements (by simultaneity or contiguity); some elements may be associated for reasons that are no more than circumstantial. The primary defence fixates the associative flow of life and prevents the recombining that is necessary for adapting to present circumstances, which are determined by that primary defence. That is why, when the free association method is indeed freed up, it improves that situation; it restores the free movement of the flow of associations, liberates the mind from its "fixation-points", its idées fixes (Janet), its harmful historical impact.

In Studies on Hysteria (1895d [1893-95]), Freud gave a more precise description of the first version of the psychoanalytic method both as to its technical aspects and as regards its implementation. Initially, this involved the pressure of the analyst's hand on the patient's forehead; when the hand was removed, an idea emerged – the first idea that came to mind was the best one, the one that was awaited expectantly. The technique was to be repeated as often as necessary. By 1900 and The Interpretation of Dreams, that technique had
already undergone some development. Henceforth, it was not simply the first idea that was seen to be relevant for the analysis but also those that were associated with that idea; in other words, the method aimed at uncovering a whole sequence of ideas. As a leftover from the suggestion method, the psychoanalyst breaks the dream down into its separate elements, each of which is the starting-point of a sequence, a crop of associations that are focalized on a given element. The psychoanalyst, who thereby "keeps his hands on" the treatment, then brings together the associative groupings that emerge and puts forward an interpretation of the whole sequence – a synthesis, as it were. Freud's own dream of Irma's injection is analysed following that model, as the step-by-step description makes clear; this is the case also of Dora's dreams (Freud 1905e [1901]). It was not until the "Rat Man" analysis that Freud (1909d) announced that the psychoanalytic method was henceforth to be based on the rule of free association, without any attempt at inducing associations.

The Minutes of the Vienna Psycho-Analytic Society (Nunberg & Federn 1962) report that, in one of the two scientific meetings devoted to that case in October-November 1907, Freud said: “The technique of psycho-analysis has changed to the extent that the psychoanalyst no longer seeks to elicit material in which he is interested, but permits the patient to follow his natural and spontaneous trains of thought.”

The meaning of these technical developments is quite clear: any remaining elements of influence and suggestion that derive from hypnosis have to be removed. They must be deconstructed so that, as far as possible, the analysand can function in a free and spontaneous manner that lends itself to analysis. Psychoanalysis depends on the gradual deconstruction of the backcloth of suggestion that is part of all kinds of psychotherapy; it is possible – and tolerable – to do this only as a result of developing its theoretical foundations. After 1907, the analysand chooses the associative theme of the session and follows his or her natural and spontaneous trains of thought – and this because Freud had come to the conclusion that so-called "free" associations are in fact constrained by the existence of unconscious associative networks that determine what path these associations follow. There is no need to be afraid of losing one's way because some internal cohesion secretly governs the flow of associations; there is no need to regulate this from outside, because it has its own internal logic and it is on this that the psychoanalyst must concentrate.
The psychoanalyst's careful listening to associativity and the transference

The method and the technique by which it is implemented depended on how Freud conceived of the workings of the mind and on his firm belief in its fundamental cohesion. The fundamental rule was meaningful because Freud had by then developed an associative theory of mental functioning and was convinced of the cohesion of the mind over and beyond any apparently psychopathological aspects; in his view, associativity depended both on conscious and on unconscious networks.

In his chapter on "The Psychotherapy of Hysteria" (1895d [1893-95], he pointed out that hysterical patients are perfectly capable of giving coherent associations; if these do not appear to be coherent, this implies that one link in the chain remains obscure, hidden or unconscious. “For we may make the same demands for logical connection and sufficient motivation in a train of thought, even if it extends into the unconscious, from a hysterical patient as we should from a normal individual. It is not within the power of a neurosis to relax these relations.” (p. 293)

He became more and more convinced of this as the years went by. He was then exploring in depth how associative links came secretly to be organized and combined together, and discovering the logic behind associative networks and other products of the unconscious.

This gradually led him to think that what was "fundamental" was not really the actual "rule", because this simply expressed how the natural associativity of the mind should be listened to and made that work easier. What is fundamental is that the psychoanalytic method enables the lifting of the censorship that surrounds the free expression of ideas. What is fundamental is the rule that applies to how the psychoanalyst attends to the material. Associations should be listened to with the idea that they are coherent; this implies that, if any two elements are brought together, there must be some kind of link between them. If that link is manifest, if it is obvious, conscious, expressed as such and coherent, there is no difficulty; the problem begins when the link is not manifest, not obvious, not expressed as such and not conscious. It is at that point that the specific nature of psychoanalytic attentiveness comes to the fore in the clinical sphere. The analyst must listen to those associations with the idea that there is some kind of implicit and
unconscious link between them; hypotheses have to be made as regards that link, and the analyst must try to reconstruct it and reconstruct the logic that underpins the sequence of associations.

Two kinds of cohesion and unconscious logic emerge from Freud's perspective at that time. On the one hand, cohesion may be circumstantial and related to the specific events in the individual's ongoing history. In this case, links are set up according to the conditioned reflex pattern that I mentioned above; they are conditioned by elements that may be fortuitous, and they come into play only because of their proximity, contiguity or simultaneity with respect to the mentally-significant event.

On the other hand, cohesion may be structural, as Freud came to understand only gradually. In this case, it is related to the important issues, conflicts and problems that occur in the life of human beings – especially with respect to emotions and sexuality (the father complex, followed by the Oedipus complex). Since most of the time these issues are in stark contrast to ordinary social life (which to a considerable degree is desexualized), they are often repressed. Freud would go on to show that they are "drawn" to the structures that organize the life of the unconscious; these unconscious concepts or "products of the unconscious" (Freud 1917c, p. 128) took on an almost structural quality in his thinking.

It is on this minimal theory of mental functioning that Freud developed his view of psychoanalytic listening; it forms a latent part of this attentiveness and structures the forms that this will take. For a more detailed view of the relationship between transference and associativity, we must look again at Freud's paper on beginning the treatment (1913c) and take into account another element concerning the fundamental rule and the interplay of transformations that it implies.

Freud stated that, in describing to his analysands the fundamental rule, he used the metaphor of a train journey: “Act as though, for instance, you were a traveller sitting next to the window of a railway carriage and describing to someone inside the carriage the changing views which you see outside” (1913c, p. 135). That metaphor implies a double transfer, a twofold transformation: transferring something from the motor/sensorimotor

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4 I prefer the idea of products or concepts to that of primal fantasies. For Freud, these had a structural value for mental experiences. In 1917, with reference to the penis as a "detachable part of the body" (1917c, p. 133) and castration, he put forward the idea of unconscious conceptions as
sphere – the train must pass through the countryside – to the visual one; the idea is to describe the countryside, then transfer that visual impression into the apparatus for verbal language. It emphasizes the fact that the psychoanalytic method implies that the individual is able to carry out this twofold transfer/transformation. The transfer into speech and the transference tend therefore to become superimposed one on the other or at least linked together. In this method, both sensorimotor and visual spheres are transferred into speech and the apparatus for verbalization. Listening to what is said in the course of a session – the transference listening to its vocal vector – can be a good way of trying to identify not only the conditions required for listening attentively but also what is conveyed about both of these spheres, i.e. what is produced when something is transferred into vocal expression. The body lends support to the voice and to what is said, and at the same time the voice conveys something of what is physically experienced – it carries with it the person's body as it conveys something of what he or she wants to say. The analysis of the transference is therefore not something "intellectual"; it is the analysis of what is actually taking place in the session, of what is expressed through the here-and-now act of speaking. This is all the more the case when the sensorimotor and visual spheres are effectively transferred into the verbal apparatus. That apparatus will take on board both the metaphorical aspect (a visual image transferred into words) and the pragmatic and rhetorical effects (the effect of motor acts on language, which becomes an action on the other person, a force for influence and suggestion). In psychoanalysis, words are not simply representations; they have an impact and they actualize something – they are a “represent-action”. When this double transferring occurs, the analyst is the one who is subjected to the seductive aspect of the transference; it is on the analyst that the impact of suggestion and hypnosis falls. That is why the analysis of the transference and that of the counter-transference have to be brought into a dialectical relationship – more precisely, that part of the counter-transference which, in a lapsus calami, I once referred to as the "showing-transference".5

What happens when this process fails or encounters significant resistance? When the individual cannot transfer his or her primary feelings into the apparatus for language?

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5 In French, counter-transference is "contre-transfert"; in his slip of the pen, the author wrote "montre-transfert", "show" the transference (Translator's note).
When sensorimotor experiences have not been organized in such a way as to enable them to be transferred into speech? It is not enough simply to listen attentively to what is actually expressed in words – Freud himself pointed this out on several occasions (1913c, and in his papers written in 1914 and 1915).

Listening to associativity is not restricted to what the analysand says; it pertains to the transference as a whole, which is not simply a way of enacting through or by means of words, as if it were some kind of verbal enactment or other. The transference can be manifested in all kinds of expressiveness and through non-verbal language. In order for it to play its full part in the analysis of the transference, listening to associativity must therefore be able to integrate pre-verbal and non-verbal language; it must integrate and take into account not only sequences of verbal associations but also those pertaining to primary forms of expression that are conveyed through the body and through actions. These are to be seen as primary forms of language because they contain within themselves aspects that are of great importance for the analysis of the transference whenever it has more to do with enacting than with remembering.

That kind of careful listening to associativity was present from the very beginning of Freud's work. My feeling is that not enough attention has been paid to it; I would therefore like to add a few comments of my own.

In *Studies on Hysteria* (1895d [1893-95]), and in particular in the chapter on the psychotherapy of hysteria, Freud describes his understanding of how the associative method is employed. It is quite clear that he included in this various physical manifestations, in particular those that had to do with symptoms of conversion hysteria, which he saw as "joining in the conversation" (op. cit., p. 296). He brought into his own manner of attentive listening everything that had to do with facial expressions, gestures and postures – these too have something to say. It is important to note that, for Freud, symptoms and bodily manifestations were a means of expressing truth; he saw in them a kind of compass. This implies that he was already seeing the transference as an important feature of what was being actualized in the course of the session. If a patient stated that he or she had nothing more to say, yet the symptoms were still present, Freud followed the indications offered by those symptoms, sure in his own mind that something had been left unsaid. It was only once the physical symptom had been eliminated that Freud would
consider the associative network linked to it as having been expressed in its entirety; the elimination of the symptom implied that what was being played out in the transference had found other means of expression, so that the patient was no longer under the unconscious influence of what he or she was expressing by means of enactment.

“Further, her painful legs began to ‘join in the conversation’ during our analyses. [...] As a rule the patient was free from pain when we started work. If, then, by a question or by pressure upon her head I called up a memory, a sensation of pain would make its first appearance [...] it would reach its climax when she was in the act of telling me the essential and decisive part of what she had to communicate [...] I came in time to use such pains as a compass to guide me; if she stopped talking but admitted that she still had a pain, I knew that she had not told me everything...” (op. cit., p. 148).

In 1913, in a paper devoted to the scientific interest of psychoanalysis (1913j), Freud makes it clear what “speech” means in psychoanalysis. He points out (p. 176) the fact that “‘speech’ must be understood not merely to mean the expression of thought in words but to include the speech of gesture and every other method [...] by which mental activity can be expressed.” That comment is the culmination of a series of ideas that can be found in several papers in which he explored neurotic symptomatology.

In his paper on "Obsessive Actions and Religious Practices" (1907b), he wrote of the girl who was under the compulsion to rinse round her wash-basin several times after washing. It was only then that she could throw out the water. Freud's analysis of that compulsive ritual shows that "obsessive actions are perfectly significant in every detail [and] they serve important interests of the personality" (p. 120). In addition, they are a representation, direct or symbolic, of something that has been experienced – they must therefore be interpreted either in terms of a given event in the individual's past or symbolically. In the example of the wash-basin, the analysis revealed that it was a warning addressed to the patient's sister who was thinking of leaving her husband – she should not throw away the dirty water of her present husband before finding the clean water of someone to replace him. It is important to note here that, for Freud, that ritual was meaningful not only as regards the relationship of the patient to her own self, the intra-psychic meaning; it involved also her relationship with her sister insofar as it was a message addressed to that person. Compulsive actions are meaningful; they tell a story – a
history – which, in addition, is addressed to someone else. In that sense, they are transferred towards some other person in the form of a message – in this particular case, a "warning", as Freud put it, addressed to the patient's sister.

The action and the transference understood in terms of an action, an enacting, illustrate a thought or a fantasy; they tell of a particular moment in time. They are shown to or spoken to someone else who plays a meaningful role in the individual's life; they are addressed to that person, even though their actual content may not be taken fully on board or if the thought that underlies them is hidden behind the means of expression itself. An enactment "shows" something, it does not "speak" about it. It tells a story, but hidden behind a mask; it forgets its own primary historical origin and displaces or reverses the original scene, which is transferred onto the here-and-now situation. In this way, it disguises the significance of what was originally experienced.

In 1909, Freud developed further his thoughts about hysteria and the show that this can put on, following what he had already set out in 1892 in his paper, written in collaboration with Breuer, "On the Theory of Hysterical Attacks" (1940d [1892]). In "Some General Remarks on Hysterical Attacks" (1909a [1908]) he emphasized the fact that in hysterical attacks, fantasies are "translated into the motor sphere" and "projected onto motility" (p. 229). Hysterical attacks and the "pantomimic portrayal" that they display are the outcome of the condensation of several fantasies (in particular relating to bisexuality) or of the acts of several characters in a traumatic scenario from the past. For example, what appeared to be an incoherent restlessness in one woman, as if she were playing out a meaningless pantomime, began to be meaningful once the overall movement could be broken down into its component parts – it could then be seen as a rape. One part of the scene, in which the woman tore off her clothes with one hand, represented the rapist's attack on her, while the second part of her movements, in which she pressed her clothes to her body, represented an attempt at protecting herself from being attacked.

In that example, an apparently meaningless pantomime which, on a manifest level, seemed to be uncoordinated restlessness could be shown to have meaning once it was analysed and broken down into the various components that secretly structured the overall pattern. What initially seemed to be simply a "discharge" then revealed the complexity of meaning that was in fact part of it, although hidden away. Hysteria "speaks" through the
body; it "shows" what the person cannot put into words and hides that aspect. In hysterical processes, actions can be interpreted in terms of affect representatives; they are a kind of language, more of an acting-language than an acting-out. They transfer language into the body and the modes of expression that are specific to it. They are also addressed to someone, to the self – a way of saying something to oneself – and to another person; there is perhaps the expectation that the other person may be able to understand the message and reflect back on the speaker what he or she said without realizing it, without actually putting it into words. In *An Outline of Psycho-Analysis*, Freud (1940a [1938], p. 202) remarks on the importance, in all of the scenarios that are reported and played out, of the person whom he called the detached spectator. The scenario is addressed to that spectator, who is also an externalized representative of the self, a double; it tells something to that spectator and once again is a message addressed to someone else, who is required to bear witness to what, in the past, had not been witnessed. Here, then, new forms of the transference are implicitly at work.

All the examples that I have taken from Freud's writings concern the neuroses. They have to do with the anal or phallic economic dimension and are part of the universe marked by the apparatus of verbal language. Surrounded by verbal language, that universe is structured by metaphor. The body "speaks", plays out, what the individual cannot express in words – although the potentiality for this is present; the body metaphorizes the scene. The structure of the action and of its playing out is that of a narrative, as Freud makes clear. The scenes that are played out narrate a scenario, a story, the story of a chapter in the person's life that he or she cannot take on board. That narrative is part of the world of language and of its symbolization modalities, even though it is the body that actually talks and shows. Although there is an attempt to tell it to the person him- or herself, it is also – and perhaps above all – a narrative addressed to some other person in his or her own right.

In the section of his paper devoted to the psychological interest of psychoanalysis (Freud 1913j), Freud expressed his belief that actions – including the stereotyped gestures that can be observed in dementia praecox (schizophrenia) – are not meaningless. Even in that extreme case they are "the remains of perfectly significant mimetic actions" which belong to the person's past (p. 174). He adds that, into "[the] craziest speeches and the queerest poses and attitudes [where] hitherto nothing but the most freakish capriciousness
has seemed to prevail, psycho-analytic research has introduced law, order and connection, or has at least allowed us to suspect their presence where its work is still incomplete.” (ibid.)

These ideas would be added to all through his life; they are at their most complete in his writings of 1937-1938, which put the finishing touches to these theoretical concepts.

It is clear, then, that although the fundamental rule of free association concerns verbal language as such and attempts to channel associativity along that path, the psychoanalyst's attentive listening cannot be restricted to that domain alone. This is particularly true when the analyst's attentiveness is dependent on the analysis of the transference and on what attempts to be enacted in that transference. In the psychoanalytic situation, suggesting and influencing are not confined to verbal speech; every kind of expression and all forms of language contribute to transferring the forgotten situation onto the present one.

Freud took all these issues into account when – partly influenced by Ferenczi – he wrote his paper on "Lines of Advance in Psychoanalytic Therapy" (1919a [1918]) and when he explored compliant dreams in 1923. In such cases, the analyst is faced with an alternative. On the one hand, there is an attempt to force all other modes of expression to adopt verbal language and thus make interpretation possible. That was the attitude adopted by Ferenczi at the beginning of the 1920s: increase abstinence, prohibit any other means of expression – that's the way it's going to be – and have recourse to a "forceful" modality, the suggestion and influence effects of which cannot be ignored; indeed, these are potentially a paradoxical form of superego seduction. The other possibility – Ferenczi later tried this way of proceeding – is to adopt techniques that would increase the receptiveness of language and of the analysand to the sensorimotor sphere. This would develop the effects of cathartic trance (Ferenczi 1930) in the psychoanalytic situation. In order to do this, some kind of intervention based on psychodrama or with a psychodramatic aim to it could be adopted; here, all the same, the threat of another kind of influencing and suggesting appears – this time more narcissistic.

It was only after a slow process of development of psychoanalytic theory that lasted until 1936-1938 that Freud again took up the question. It could then be expressed in terms of other problem situations concerning psychoanalytic technique, and developed in his
final papers on the subject: "Constructions in Analysis" (1937d) and "Analysis Terminable and Interminable" (1937c).
References:


