

# BOOK REVIEW

Erik H. Erikson *Insight and Responsibility*  
(New York: Norton & Co., 1964)

This book has the sub-title, 'Lectures on the ethical implications of psychoanalytic insight' and consists of expanded versions of six lectures which Erikson gave during the period 1956 to 1963. I shall deal with each lecture in turn and then attempt a summing up.

The opening lecture, entitled 'The First Psychoanalyst', was given in Vienna in 1956 on the occasion of the 100th birthday of Sigmund Freud. In outlining the history of Freud's early discoveries, Erikson tries to convey the unique responsibility which Freud bore in doggedly pursuing his insights. He likens Freud's task - the attempt to uncover the truths of human nature - to that of Darwin's, as being the innovator's personal struggle against the forces of the status quo. Freud felt compelled to follow up every clue and every contradiction, no matter where they would lead him, and this entailed a responsibility which at times weighed on him so heavily that in the early years he frequently wanted to abandon the whole idea (as some of his letters to Fliess testify).

Yet Erikson is not content to give us a conventionally eulogistic account of Freud's scientific conscience: he is at pains to demonstrate that Freud introduced into psychological enquiry something which was *more* novel and revolutionary than he himself was prepared to admit. It came about, says Erikson, with the realisation that in his dealings with the patient the observer was being non-rationally affected by his observations. With the tradition of laboratory science behind him, Freud's inclination was to detach himself and protect himself from these involvements, but his essential contribution (and this marks a historic point of departure from the methods of laboratory science) was to insist that it was only by virtue of these very involvements that the truths of psychoanalysis could emerge.

This gave rise to the two cardinal principles of psychoanalysis, principles which involve the practitioner in a peculiar ethical position, over and above the ordinary ethics of scientific honesty. The first is that psychoanalytic study is based on a *mutual contract* between patient and therapist, involving responsibilities on both sides; and the second is that, as a therapist, you will not see in another what you have not learned to recognise in yourself - placing on you the responsibility of continual self-scrutiny.

These principles lie at the root, not merely of psychoanalytic therapy, but of the whole structure of psychoanalytic doctrine. They imply that the psychoanalyst has continually to live with the insecurity of a subjective technique as the price he pays for his insights. They also imply that psychoanalytic formulations are subject to social and political change, since such shifts bring to the fore unpredictably novel characteristics

and attitudes both in patient and therapist. Because of its ethical sensitivity to changing historical influences, says Erikson, 'the psychoanalytic method must remain forever a controversial tool - a tool for the detection of that aspect . . . of man which in a given historical period is being neglected or exploited, repressed or suppressed, by the prevailing technology and ideology', - including, he unexpectedly adds, 'hasty psychoanalytical ideologies'.

But although we must acknowledge the greatness of Freud's insights, it is only the direction, the focus, the method, and the responsibility which future psychoanalysts may take from him: the literal *content* of his insights is of historical rather than factual importance; while attempting to remain true to its conceptual core psychoanalysis is, in fact, committed to perpetual revisionism.

What Erikson has done here, it seems to me, is to draw his conclusions from Freud's own life rather than merely from his teachings. He has incorporated the character of the founder into that of the doctrine. Freud, it should be remembered, did not claim - in fact he specifically repudiated - a special ethical character for psychoanalysis. He said that psychoanalysis had no ethical content or philosophy apart from the ordinary ethics of scientific endeavour - namely, to discover and communicate the truth. But Erikson wants to demonstrate that Freud took for granted the nature of science, the nature of morality, and most important, the nature of Sigmund Freud. He has tried to show that although Freud himself was not aware of his own idiosyncratic approach to psychological truth, it was in fact destined to have tremendous significance, not only in relation to the facts which it uncovered, but in relation to the responsibilities to which it pointed.

This is, to me at any rate, a novel and unexpected approach which he proceeds to develop more fully in the second lecture, which is entitled 'The Nature of Clinical Evidence' and which shows how the psychoanalyst gathers his data in the dual task of psychological discovery and therapeutic action. Here Erikson takes the opportunity of presenting us with an audacious example of his own clinical 'style' and a justification of the ethical and therapeutic 'rightness' of his approach.

The patient in this illustration is a theological student in his early twenties who had suffered a severe breakdown in which ideas of impending insanity and feelings of panic are prominent. A single incident is highlighted. It occurred after about six months of treatment when both patient and therapist had agreed that considerable gains had been achieved, so that termination of therapy was imminent.

The patient arrived for the customary session and announced that he had just had the most shattering, demoralizing dream, and that he felt plunged into his original panic-ridden state as a result. I am not going to detail either the dream or the patient's psychopathology. Suffice it to say that Erikson tells us that all the previous clinical evidence (as he saw it) pointed to the fact that this was not a genuine relapse but rather an appeal - and a threat - *not to terminate therapy*. How to react to this message was the critical issue. (The traditional procedure would presumably be to allow the patient himself gradually and non-directively to acquire insight into the meaning of the incident. But that is precisely what Erikson did *not* do.)

Before telling you what he *did* do, let me outline his 'clinical philosophy'. In the first place Erikson dispenses with the couch: therapist and patient face each other across a desk. This he justifies on the grounds that the therapeutic encounter must be a *mutual activation*, in which two-way communication, both verbal *and* gestural, can occur. In fact, he says that 'the evidence is not 'all in' if the clinician does not succeed in using his own emotional responses' as a source of evidence and as 'a guide in intervention, instead of putting them aside with a spurious claim to unassailable objectivity'. As important as his 'sensory responses' in the laboratory are the observer's emotional responses in the clinical encounter. The same goes for those 'ethical judgements which grow with his increasing insight and experience'. He argues that these comprise one of the principal tasks of clinical perception, both for therapy and for theory. In fact, he attacks those of his colleagues who have 'embraced an objectivity which can be maintained only with self-deception'.

Erikson, to be brief, reacts to the patient's dream and its associations with a generous display of indignation and anger. Although the dream had worried him and moved him, so he tells the patient, he had also felt challenged and attacked; and he refused to be burdened with responsibilities which he (the patient) was fully able to bear himself.

Erikson gives us the outcome. 'Relating the fact that his underlying anger aroused mine and that I could say so without endangering either myself or him' proved strategic for the whole treatment, because the patient reacted with amusement and delight; 'He left the hour to which he had come with a sense of dire disaster - with a broad smile and obvious encouragement'.

Erikson sums up the whole matter thus: 'Scientists may learn about the nature of things by finding out what they can *to* them, but the clinician can learn of the true nature of man only in the attempt to do something *for* and *with* him . . . Clinical evidence is grounded in the study of what is unique to the individual case, *including the psychotherapist's own involvement* . . . '.

The third of Erikson's lectures is entitled 'Identity and Uprootedness in Our Time'. In it he offers us some insights into the mental mechanisms of those who have been uprooted by war or other catastrophe and shows us where the responsibility of the psychiatric profession lies in trying to repair the harm done to the identities of such individuals.

He draws parallels between the man who is physically uprooted and the uprootedness that occurs in every man at every stage of development. One point concerns the functioning of the ego when the individual is faced with the need to retain his identity after having been torn from his customary life-space. He says that only the individual with a well-established identity can tolerate radical change, because 'the well-established identity has arranged itself around basic values which (different) cultures have in common. Identity does not connote a closed inner system impervious to change' but rather a process in which 'societies verify a new individual and are themselves historically verified, for the individual is induced to put at the disposal of societal processes that conflict-free energy which he was able to save up, as it were, from his infantile conflicts.'

'The danger of any large-scale uprooting and transmigration is that exterior crises will in too many individuals and generations upset the hierarchy of developmental crises and their built-in corrections . . .'. This means that *identity diffusion* and the assumption of a *negative identity* is likely to become endemic, creating wholesale social problems. The responsibility of those clinicians into whose hands the care of such people falls is this: that they become '*The guardians of lost life-stages*'.

One can see certain implications in all this for those people in South Africa who are, for example, uprooted by the system of migrant labour, yet who receive only partial recognition as individuals by the society into which they move. Such people in Erikson's terms, are not fully 'verified' by their new societies and are not likely to maintain or develop healthy identities.

The fourth lecture is probably the most important in the book. Entitled 'Human Strength and the Cycle of Generations', it is a psychoanalytic exposition of the eight cardinal 'virtues' of man, their origins and their evolution. What Erikson interchangeably calls human strengths or virtues are amalgams of maturity concepts, mental health concepts and ethical concepts. They are certainly not moralistic ideals in the sense of uprightness or virtuousness; rather he says, do they suggest 'a combination of courage and restraint which can be developed in the individual from stage to stage and imparted from generation to generation'. These eight virtues or strengths emerge, in fact, during the individual's successful negotiation of the eight critical psychosocial stages. Thus, corresponding to the psychosocial crises of infancy, which Erikson has called 'Trust vs. Mistrust' we have the virtue or strength of 'Hope'. *Hope, will, purpose and competence* are the childhood virtues, *fidelity* is the adolescent virtue, and *love, care and wisdom* are the central virtues of adulthood. These virtues form a hierarchy: each can come to its full flower only if the preceding ones have successfully developed during their critical stages, and each is consolidated under conditions of 'mutual activation' within and between the generations. Thus the infant virtue of *hope* nourishes and is nourished by the parental virtue of *care*; the adolescent virtue of *fidelity* can only be fulfilled (a) if the preceding strengths have a chance to develop, (b) if the adult world provides ideals and values worthy of the potential loyalty and zeal of adolescence, and (c) if there are adequate opportunities of sharing these experiences with age-mates.

Each of these virtues can be acquired during its corresponding critical phase, but once acquired it endures throughout life. This is how Erikson defines them: '*Hope* is the enduring belief in the attainability of fervent wishes, in spite of the dark urges and rages which mark the beginning of existence. *Hope* is the ontogenetic basis of faith . . .'. '*Will* is the unbroken determination to exercise free choice as well as self-restraints, in spite of the unavoidable experience of shame and doubt in infancy'. '*Purpose* is the courage to envisage and pursue valued goals uninhibited by the defeat of infantile fantasies, by guilt and the fear of punishment . . .'. '*Competence* is the free exercise of dexterity and intelligence in the completion of tasks, unimpaired by infantile inferiority.' '*Fidelity* is the ability to sustain loyalties freely pledged . . . It is the cornerstone of identity . . .' '*Love* is the mutuality of mates and partners in a shared identity . . . it is mutuality of devotion . . . and is thus the basis of ethical concern.' '*Care* is the widening concern for what has been generated by love, necessity

or accident'. '*Wisdom* is detached concern with life itself in the face of death itself . . . '.

The second part of this lecture deals with neo-analytical concepts of the ego. Erikson rebukes those who still cling to the earliest psychoanalytical formulations in which the ego is seen as a pathetic compromiser, a passive agent pushed and pulled by the superior and conflicting forces of the id and the superego. As long as this view is held we will never be in a position to understand and develop man's *strengths*. 'The central ethical problems to which psychoanalysis is dedicated, both as a clinical technique and as a system of thought, is the supercession of the primitive superego by some more rational and less cruel mechanism'.

'The psychoanalytic meaning of ego designates it as an inner psychic regulator which organizes experience and guards such organisation both against the untimely impact of drives and the undue pressure of an overweening conscience.' The ego has gradually come to be seen as 'the guardian of meaningful experience' and as 'an organ of active mastery' not only defending the person against excessive onslaughts both from within and from without, but also in integrating his positive powers of adapting to the environment with the sense of being an *active state*. This implies that the ego functions as the protector of one's sense of *wholeness*, one's sense of *centrality*, and one's sense of *freedom of choice*. These notions, says Erikson, man cannot do without, and if forced to he will maintain them with secret illusions and delusions.

Erikson ends the lecture by declaring that our insight into the development of ego strengths in relation to the life-cycle forces us to acknowledge 'the responsibility of each individual for the potentialities of all generations and of all generations for each individual'. (He also puts it in another way: - Psychoanalytic insight implies a 'fundamentally new ethical orientation of adult man's relationship to childhood, to his own childhood, now behind and within him, to his own child before him and to every man's children around him'.)

In the fifth lecture Erikson gives an unexpected twist to the issue of insight and responsibility. He counterposes two aspects of ego functioning, *psychological reality*, which corresponds to the awareness of one's self and one's environment with a minimum of distortion and a maximum of validation, and *historical actuality*, which corresponds to the participation, in social action, 'with a minimum of defensive manoeuvring and a maximum of mutual activation'. These are not mutually exclusive functions, but Erikson differentiates them conceptually in order to show up a danger to which traditional psychoanalysis has become exposed. The danger lies in giving psychological reality, which corresponds roughly to reflection and *insight*, more than its due, and to neglect or deride the world of active commitment and involvement. Imposing one's insights on the world of social and political action can result in immobilization, withdrawal from healthy mutuality, and hence repudiation of one's true responsibilities.

Erikson even goes as far as to criticise Freud's handling of the case of the 19-year-old Dora ('Fragment of an Analysis of a Case of Hysteria' (1905)) on the grounds that he failed to recognize her need for direct reassurance and sympathy from him regarding

the reasons for her adolescent identity crisis. She had been subjected to certain debilitating traumas and had discovered that her parents and other members of their generation had acted in a dishonourable and deceitful manner towards her. Freud felt that Dora had, in analysis, acquired the necessary insight into these events to come to terms with herself, but that she was for some reason unwilling to do so. 'What else did Dora want from me?', he asked. Erikson's answer is clear. A developmental crisis will not be resolved merely through the acquisition of insight on the part of the patient. *He needs to experience in therapy what was denied to him in real life* - in this case a strong measure of confirmation and support as an ethical commitment on the part of the therapist.

Erikson then talks about the very limited success of psychoanalysis in preparing patients and students for the world of actuality, social and political. He says that many of them appear to be *burdened*, rather than eased, by their insights; they then proceed 'to burden home and work, profession and citizenship with the compulsion to superimpose psychic reality on shared actuality . . . They insist on spreading this sense of reality over the social scene, unmasking disguises, exposing defences and combating denials . . .'. What is needed, in committing oneself to actuality is a spontaneous and total response, encompassing unconscious as well as conscious elements.

The psychoanalytic profession must participate more responsibly in the political actuality of the day. In fact, he concludes, a code of 'enlightened partisanship' paralleling the Hippocratic Oath of medicine, should be adopted.

In his sixth and final lecture Erikson amends the Golden Rule in the light of neoanalytic insight. 'Do unto others as you would have others do unto you' is a theme which occurs in all the great religions and ethical systems. Again he looks at the problem from the vantage point of the human life-cycle, seeing each stage of development as having a particular quality of ethical potential and relating it to the ethical potentials of other life-stages with which it interacts. To begin with, he distinguishes very sharply between 'morals' and 'ethics'. The 'moralistic' point of view is the most primitive form of conscience; it is based on the fear of threats from within and from without; it corresponds to the crude and harsh superego acquired in infancy and often re-emerging in adulthood as a narrow and malignant righteousness. The 'ethical' point of view is that embodied in the mature conscience; it is based on ideals, yet has a high rational content and is firmly grounded in the world of actuality and mutuality. In between these two extremes, we have the adolescent perception of the good, which is in terms of an ideology into which he pours his zeal and in which he finds his identity.

His basic contention is that a universal rule of conduct must have place for the concept of mutuality - 'in which partners depend on each other for the development of their respective strengths,' For example, 'the parent dealing with a child will be strengthened in *his* vitality, *his* sense of identity and in his readiness for ethical action by the very administrations by means of which he secures to the child vitality, future identity and eventual readiness for ethical action'. This early mutuality, in which hope and trust are born, is the foundation for all future encounters between the doer and the other where there is a 'mutuality which strengthens the doer even as it strengthens

the other . . . '. 'Thus the doer is activated in whatever strength is appropriate to his age, stage and condition even as he activates in the other the strength appropriate to *his* age, stage and condition'. Erikson's finally-amended Golden Rule reads: 'Do to another what will strengthen *you*, even as it will strengthen *him*, i.e. what will develop *his* best potentials even as it develops your own'. As applied to medicine and psychotherapy, it exhorts one 'to develop as a practitioner, and as a person, even as the patient is cured as a patient, and as a person'. In other words truly therapeutic encounters are mutually therapeutic - as well as ethically enhancing both to healer and healed.

Psychoanalysis has reached the stage, in other words, where it generates its own ethics, and whoever embraces it embraces a responsibility which reaches deep into man's present situation as well as far into his future.

So much for description. Now for some comments and a general summing up: -

The most telling impression left on me by Erikson's book was that if this is psychoanalysis then psychoanalysis has changed almost beyond recognition in the last 50 years. Its philosophy has changed, its theoretical preoccupations have changed and its therapeutic techniques have changed. To someone like myself who has not kept abreast of neoanalytic literature, the impact of Erikson's formulations is doubly great. The question I would like to raise - a question as old as psychoanalysis itself - is: to what extent, and in what sense, is psychoanalysis a science? Let us compare Freud's answer with Erikson's answer.

Freud held that psychoanalysis *was* a science, in the traditional sense of the word. Having received his early training in the biological sciences he attempted to construct a model of mental functioning which followed as closely as possible a physicalistic pattern. For one thing his postulate of *psychic determinism*, in which every event in experience and behaviour - no matter how trivial or bizarre - is seen to be, not the product of chance or 'free will' but the outcome of discoverable antecedent events, was an impressive and courageous attempt to extend the deterministic basis of the 'laboratory sciences' into the field of psychology. For another, Freud maintained a strict dichotomy (as a behaviourist, for example, might do today) between the objective search for psychological truth and his subjective ethical notions concerning man and his condition. In other words he kept his science separate from his humanism - or at any rate he *thought* he did. Erikson shows, and I think shows convincingly, that he was misled in so thinking. He believes that it has become the duty of post-Freudian psychoanalysts to correct this assumption and this book explores the implications of carrying such a task through.

For Erikson, psychoanalysis is *not* a science in the traditional, laboratory sense of the word, and never can be. For this reason: - in traditional scientific methodology the aim of the observer is to *distance* himself in some way from the object or event under scrutiny; he takes infinite pains to ensure that his results are not contaminated by the so-called 'experimenter effect', whereas in psychoanalysis observer-involvement, both emotionally and *ethically*, is seen as the first condition for securing knowledge about human functioning. The psychoanalyst is not a scientist in his role of enquirer-

after-psychological-truth and *then* a humanist in his role of practitioner-ministering-to-the-emotionally-ill, as, say the behaviourist is. He represents a distinctly new phenomenon, the true amalgamation of science and faith - and I use the word faith advisedly: for humanism *is* a faith; a religion without the tribalism and without the supernaturalism. And curiously enough, the realization that psychoanalysis is a scientific humanism rather than a *science about humans* might make it not less but *more* acceptable to those who, like myself, have in the past applied to psychoanalytic findings the yardstick of experimental methodology - and found it wanting; because the truths of psychoanalysis are simply not commensurate with the truths of scientific psychology, where you do things *to* people (or rather to organisms or specimens) rather than for them or with them. Behaviourists don't criticise artists because they aren't scientific, and I think there is just as little reason to criticise psychoanalysis because of its avowedly ethical foundations. In fact I imagine that it will be the traditional Freudians who are likely to be disturbed, and even outraged, by Erikson's bold revisionism and the prospect he holds out for nothing but perpetual reformulations in the future.

Having asked the question, Is psychoanalysis a science? and answered it with a qualified negative, we may now ask Is psychoanalysis, with its ethical basis, going to provide us with what we so undeniably need in these anchorless times, namely a guide to conduct? Erikson says Yes, and he has spelled out a psychoanalytic schedule of virtues and given us a psychoanalytic Golden Rule. But here we must be careful. It is one thing to talk of virtue and the 'highest good' in abstract terms or when we are looking at a situation retrospectively, but quite another when we are faced with an immediate moral dilemma in the world of actuality. Tell me what you did yesterday and I can analyse the ethical content of your actions in terms of Erikson's criteria; but ask me what you ought to do tomorrow and I am powerless to assist you in any ethical way, no matter how many tomes on ethics I master; in fact, no outside agency whatever can help you in an ethical dilemma, because by definition the responsibility is yours and yours alone; try to share it or to solve it by the mechanical application of a code or a formula and you are immediately evading the very responsibility which you are required to meet.

A well-known example from Jean-Paul Sartre, the existentialist, will illustrate this more clearly. A young Frenchman during the war was faced with this choice: he could either remain with his bereaved mother, of whom he was the sole support materially and otherwise; or he could join the Free French Forces and fight in a cause in which he fervently believed. Which should he do? The Golden Rule says, 'Do unto others as you would have others do unto you', but this is no help, because it applies equally to his mother on the one hand and to his compatriots on the other: they both need him and he can in different ways identify with either of them. And Erikson's amendment that what you do should strengthen *you* even as it strengthens the other is equally applicable to either alternative. 'Do unto others . . . ' *which others?* This is the fatal flaw in the Golden Rule, that it does not recognise that in a complex adult world, ethical choice is very seldom between good and evil but usually between one good and another good.

(Clinicians are no exception in being confronted with these choices. At our Guidance



Clinic we are faced with this problem: a mother of three wants to adopt a derelict five-year-old-boy, of whom she is the temporary foster-mother, but has doubts because the child is often cruel and vicious and she thinks he may have 'criminal tendencies'. We find that until very recently this child was 'brought up' by a mother (estranged from her alcoholic husband) who half-starved the boy and savagely beat him almost continually since birth. If the foster-mother, who would make an excellent adoptive parent, doesn't take him he will probably remain in the care of different institutions and foster-parents indefinitely. What would strengthen you as a clinician even as it . . . etc. etc?)

Erikson has shown us in great detail where the Good Life lies and no-one will want to quarrel with him over its broad outlines, but neither his formulae nor anyone else's can help us solve such ethical predicaments; to meet them in good faith means inevitably to be plunged into what the existentialists call 'anguish'.

Finally, a word about Erikson the writer. I think he must be the most literary of psychoanalysts since Freud. He doesn't always have Freud's lucidity of exposition, but he does avoid the dreary, cliché-ridden jargon of many post-Freudians. However, he sometimes adopts a very condensed, abstract, epigrammatic style which can be quite daunting and which takes several readings to digest. I have indicated only a small part of the richness which is to be found in this book, and if ever you feel inclined to grapple with the conceptions of a formidably equipped man, a virtuoso of his profession, you couldn't do better than study 'Insight and Responsibility'.

### A. Abramovitz

---

#### The Running Has To Stop

I retreat.

Hide behind, this wall of my mind.

I am not as yet one, with myself.

- with the world.

Angry teeth, they snarl in my face.

An intruder,

Breaks through, this wall of my mind.

His feelings reach mine -

A first link.

The world and I, we write.

I loose myself to it.

Brenda J. Warren