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The American Journal of Psychoanalysis, ***2010, 70,*** *(328–340)*
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BUILDING BLOCKS TOWARD CONTEMPORARY TRAUMA THEORY: FERENCZI'S PARADIGM SHIFT

Judit Mészáros

In laying down the building blocks of contemporary trauma theory, Ferenczi asserted that *trauma is founded on real events* and that it occurs in the interpersonal and intersubjective dynamics of object relations. He stressed the significance of the presence or lack of a trusted person in the post-traumatic situation. After the trauma, the loneliness and later the isolation of the victim represent a serious pathogenic source. In the traumatic situation, the victim and the *persecutor/aggressor operate differing ego defense mechanisms*. Ferenczi was the first to describe the ego defense mechanism of identification with the aggressor. Ferenczi pointed out the characteristic features of the role of analyst/therapist with which (s)he may assist the patient in working through the trauma, among them being the development of a therapeutic atmosphere based on trust, so that the traumatic experiences can be relived, without which effective therapeutic change cannot be achieved. For the analyst, countertransference, as part of authentic communication, is incorporated into the therapeutic process. These are the key building blocks that are laid down by Ferenczi in his writings and appear in later works on trauma theory.

KEY WORDS: trauma theory; identification with aggressor; transference–countertransference; Ferenczi.

DOI:10.1057/ajp.2010.29

The framework for contemporary trauma theory developed through a number of theoretical shifts. In this study, I wish to highlight the elements that prompted the paradigm shift in trauma theory with which Ferenczi helped to lay the groundwork for contemporary trauma theory.

Ferenczi's *paradigm shift* in trauma theory is a process that began in the 1920s. Essential elements of it can be discerned in several of his studies (see Frankel, 1998); however, his most important findings are to be found in his "Confusion of Tongues between Adults and the Child", or simply "Confusion of Tongues" (Ferenczi, 1933), as well as in his *Clinical Diary* (Ferenczi, 1988).

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Freud noted in his own diary in 1932 that "Ferenczi has totally regressed to the etiological views I believed in and gave up 35 years ago that the gross sexual traumas of childhood are the regular cause of neuroses …" (Freud, 1992, p. 131). However, Ferenczi's approach did not represent a step back to Freud's first trauma theory. Freud was focusing on Ferenczi's unsolicited reading of his "Confusion of Tongues" lecture during his visit of Freud, well before the 1932 Wiesbaden conference.[1] Freud felt that, in the paper, Ferenczi resuscitated his theory of seduction from several decades before, regardless of the fact that he had long ago questioned his patients' stories of childhood or adolescent seduction, and regardless of the fact that he had used the role of fantasy to account for experiences that were factually unverifiable and in all certainty complete fabrications of reality. Now here was his old friend and colleague making the absurd assertion that the traumatic experiences related by patients had in fact taken place.

It was the bitterness and disappointment Freud felt at the assumed reawakening of his own first trauma theory that prevented him from acknowledging Ferenczi and the revolutionary approach of his *confusion of tongues* metaphor in what is today one of Ferenczi's most frequently cited studies. Ferenczi's new approach recognized the misinterpretation by adults of the *diverging motives of child and adult*; the *interpersonal and intersubjective* mutual effect; the different *ego defense mechanisms* of child and adult; as well as the complexity of the psychological dynamic of the entire traumatic situation. It was all these elements with which Ferenczi went well beyond Freud's earlier seduction theory in 1932 and established the object relations approach of modern trauma theory.

Before I turn to how Ferenczi arrived at his paradigm shift, I should like to clarify a few basic, yet key points in my approach to the phenomenon of trauma in the present study.

PERSON-AGAINST-PERSON TRAUMA

First, I will differentiate between the dynamic of *person-against-person trauma* and, as a subset of this, trauma that occurs within the immediate or extended family and within communities versus trauma produced by *natural disasters* and mass accidents. In my view, the latter can generally be set apart from the former because of one extremely important element: the phenomenon of *solidarity*. Whereas natural disasters, accidents and even terror attacks bring out almost immediate signs of solidarity in one's surroundings, as well as its psychic and associated forms and gestures of aid, which can also be tapped into later, these gestures are generally lacking with regard to person-against-person acts that produce trauma within the family or community. But why is this so? The most common answer to

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the question is that the participants—and here I am not only thinking of the victim and the persecutor, but also those members of the community in a broad sense who participate tacitly—*endeavor to cover up the traumatic event*, each with different motives.

With natural disasters and mass accidents, one *can count on the sympathy* of one's environment, objective and psychological expressions of aid and various forms of care, with which the internal process of working through the trauma may begin in tandem. The person receives aid and is thus not left alone. What happened is no secret, the victim does not become isolated, and thus the fragmented experiences that stem from the trauma begin to find expression, creating a natural impediment to the formation of a taboo. It is worth mentioning that a taboo and with it the very community that sustains the taboo isolate the victim and leave him or her emotionally alone, resulting in the development of pathological reactions, as the traumatic experience becomes fixed and deeply rooted in the victim. This then sets the stage for the re-occurrence of trauma, what we would today call *transgenerational trauma*.

TRAUMA THEORY

Defining trauma

Today, when we discuss trauma it is not always clear what we mean, as the term has become a fixture of professional and ordinary use. We frequently use the words trauma or traumatic situation to describe painful or unpleasant experiences, loss or disappointment. Oceans of literature cover the substantive watering down of the meaning of the word. In an effort to arrive at common ground, I return to the definition of trauma in the *The Language of Psychoanalysis* (Laplanche and Pontalis, 1973), and in the spirit of this work—with certain additions—I describe trauma as follows:

> An event in the life of a subject which is characterized by the fact that a set of physical and/or psychic stimuli affecting the personality exceeds the tolerance level of the individual's given developmental stage/condition. The individual, therefore, is incapable by the usual means available of preventing, stopping or effectively processing this set of psychically damaging stimuli or of restoring the previous state of balance. (p. 486)

FREUD'S THEORIES OF TRAUMA ARE INTRAPSYCHIC MODELS (1895–1917)

First trauma theory

In this view, every neurotic is damaged and the fundamental damage is brought about in the area of sexuality. Early infantile sexual traumas are

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driven out of the consciousness/memory as a result of repression, and thus they become unconscious (Freud and Breuer, 1893). Freud writes in the *Aetiology of Hysteria* that "at the bottom of every case of hysteria there are one or more occurrences of premature sexual experiences" (quoted by Judith Herman, 1992, p. 13).

Second trauma theory

Freud soon retracted his first trauma theory on the pathogenesis of hysteria. He was concerned about the fierce disputes within the discipline that had emerged from his radical thoughts, but more importantly he found the sexual abuse so often mentioned to be all too irrationally frequent even for him. Freud burst out in his letter to Fliess in 1897: "I no longer believe in my neurotica" (Freud: Letter to Fliess, September 21, 1897 in Masson, 1985, p. 264).

So where do we go from here? How can we resolve the dilemma? Are patients lying? Are they not recalling the past correctly? Freud writes about this in his "An Autobiographical Study":

> When however, I was at last obliged to recognize that these scenes of seduction had never ever taken place, and that they were only fantasies which my patients had made up or which I myself had perhaps forced upon them, I was for some time completely at a loss. (Freud, 1935, p. 37)

We arrive at a solution that is a form of compromise: *traumas can even be caused by pathological fantasies*; it is not absolutely necessary for real events to be in the background. There is no difference between fantasy and reality. This view has been refined by Haynal on the basis of Freud's writings. Haynal proposes that there is a change in proportions. It is possible that a real event lies behind the trauma; it is also possible that fragments of fantasy constitute the narrative (Haynal, 2002, pp. 43–44). One thing is certain, however: reality has been questioned as the basis for events recounted by patients. The traumatic effect of external reality has been replaced by the role of fantasy in the development of traumatic experiences.

The economic model of trauma theory

Continuing his work on the role of fantasy and "in the network of events, desires, and fantasies" (Haynal, 2002, p. 44), Freud arrived at the experience of frustration: trauma is caused by lack of satisfaction, independent of whether it was fantasy or reality that contributed to the arousal of desires. Moreover, Freud also added his concept of the helpless ego: one becomes

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neurotic when one's ego somehow loses its ability to regulate the libido. The individual becomes *helpless* because (*s*)he is *left alone or is over stimulated* (Freud, 1916–17).

This concept of the lonely self appears in Ferenczi's *trauma* theory (see Frankel, 1998), in Karen Horney's (1937) *basic anxiety* (an "all-pervading feeling of being lonely and helpless in a hostile world", p. 89), in René Spitz's (1945) theory of the *hospitalism* syndrome, in Mahler's (1975) model of *individualization-separation*, and in Bowlby's (1973) approach to early *separation anxiety*.

So far Freud's theories have primarily represented intrapsychic approaches, even if the "drive object" signified the other person. The reason for this is that the *real* or *fantasized* events, triggered by the external object, working instinctively, *suggest an intrapsychic dynamic*.

FERENCZI'S THERAPEUTIC EXPERIENCES AND THEORETICAL APPROACHES FACILITATED HIS PARADIGM SHIFT

1. In the *Development of Psycho-Analysis* (1924), Ferenczi and Rank recognized that experience comprises a large number of subjective elements and placed *emotional experience (Erlebnis)* at the center of both psychic diseases and psychoanalytic therapy. This is reflected in the notion of "subjective truth" described in Ferenczi's earliest work, "Spiritism", in 1899 (also in Mészáros, 1999). They realized that results in psychoanalysis were not obtained by searching for objective truth, but *by reliving traumatic experiences and subsequently working through* them on an emotional rather than intellectual level. Ferenczi and Rank eventually concluded that Freud had no genuine theory of emotional life, only a highly abstract and intellectualized theory of libido (Kramer, 1997, p. 222). Not all emotional experience can be reduced to disguised derivatives of libido. Ferenczi and Rank replaced Freud's process of (a) intellectual reconstruction of the traumatic events and (b) didactic analysis—work that had focused on interpretation and emotionally one-way communication based on transference—with a two-way relationship between analyst and patient, which is also experienced affectively by both parties. The analyst identifies with or reflects the emotional experience of the patient, regardless of the "objective truth" of the patient's emotional experience. A new atmosphere develops in the analytic situation at the heart of which lie authentic communication and trust (Ferenczi, 1928; Hoffer, 1996).

2. Psychoanalysis becomes a system of *multi-directional processes of interpersonal and intersubjective elements*. Developing confidence between analyst and analysand becomes an indispensable means of approaching traumatic experiences. Authentic communication on the part of the

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therapist becomes a fundamental requirement, as false statements result in dissociation and repeat the dynamic of previous pathological relations. As we would phrase it today, false reflections result in false self-objects. Ferenczi's early psychoanalytic study "Psychoanalysis and pedagogy" discusses the pathogenic effect on children of the behavior of adults who invest themselves with the myth of infallibility, as well as its frequent occurrence in a wider context of superordinate–subordinate social relations (Ferenczi, 1908). Ferenczi stresses that the therapist's ability to deal with criticism is part of authenticity.

> The setting free of [the patient's] critical feelings, the willingness on our part to admit our mistakes and the honest endeavour to avoid them in future, all these go to create in the patient a confidence in the analyst. It is this confidence that establishes the contrast between the present and the unbearable traumatogenic past … the past no longer as hallucinatory reproduction but as objective memory. (Ferenczi, 1933, p. 160)

In this interaction, any sort of expression or gesture provides information and possesses communicative power—even *silence*. Indeed, the silence of the therapist, "the sound of silence", represents an experience no less packed with meaning for the patient as the converse does for the therapist: a silent patient also triggers numerous feelings and thoughts of countertransference in the therapist. I offer an illustration from a case of mine, where in the closing period, after years of analysis, the patient says: "I know your silences too. Sometimes you're silent because you're tired, other times because you know that what I'm saying is important to me but insignificant for you. Sometimes you're very interested in what I'm saying but you don't want me to know … ".

3. Ferenczi recognized that *empathetic* acceptance of a patient, or love for a patient in a broad sense—a positive expression of basic acceptance—which does not preclude the presence of feelings of even negative countertransference, plays just as much a part in the work of the psychoanalyst as in the appropriate development of personality. Clara M. Thompson, Ferenczi's American analysand and colleague, wrote about this:

> Ferenczi also believed that love is as essential to a child's healthy growth as food. With it, the child feels secure and has confidence in himself. Without it, he becomes neurotically ill … [or] often dies because of lack of love … . Today, other analysts—notably Fromm and Sullivan—have presented similar ideas, but I believe Ferenczi was quite alone in Europe around 1926 in this type of thinking. (Thompson, 1988, p. 187)

Security soon takes on significance not only in the role it plays in the therapeutic atmosphere, but also as a part of optimal personality development.

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Sullivan regarded both security and the resultant reduction of anxiety as being among the fundamental individual needs. Sullivan (1953), like Ferenczi, located the source of anxiety in the social nature of the human psyche, finding its origin in the humiliation of past relationships, the anguish and the shame, all of which taught the individual that the leading motive in one's life is to try to avoid these and to achieve security. Michael Balint viewed the loss of basic trust as one of the early traumas, which has to be restored during the healing process (Balint, 1933). Margaret Mahler (1975) speaks about the significance of the issue of confidence/trust in the period of separation and individualization in her discussion of the appearance of the "affective consistency of objects" as a means of overcoming the frustration that sets in between separation and return. Internalized self-representations are able to resist temporary frustration.

Winnicott happened upon the same notion of love ascribed earlier in this paper to Ferenczi: "A baby can be fed without love, but lovelessness or impersonal management cannot succeed in producing a new autonomous human child" (Winnicott, 1971, p. 127). Much like Ferenczi, Winnicott also emphasized the early mother–child relationship in the psychological development of the individual (Borgogno, 2007). He saw the effective mechanism of psychoanalysis as drawing out and accepting the individual's subjectivity. The analyst satisfies the needs of the ego, which have been previously unmet.

4. In the early 1920s, Ferenczi's therapeutic repertoire expanded with a newer understanding. The authenticity and intersubjectivity within the dynamic of therapeutic relations described previously necessitated the addition of countertransference to transference in the psychotherapeutic process. Countertransference would become part of the model of the central dynamic of therapy organized around transference–countertransference (Ferenczi, 1919; Ferenczi, 1928). The role of the analyst changed: the reflective attitude of the analyst (Fonagy, 2001) became part of the therapeutic atmosphere. Beyond Ferenczi, this attitude became part of the working style of most of the Budapest analysts. The work of Michael and Alice Balint, Vilma Kovács, Fanny Hann Kende and another follower of Ferenczi's, Therese Benedek, was informed by this conviction as of the early 1930s, and later, after they had emigrated, they exercised an important influence on the development of modern psychoanalysis elsewhere in Europe and on the other side of the Atlantic (Mészáros, 2004).

We cannot overestimate the significance of the quality of relationships in psychic development and psychotherapeutic practice. Attachment theories in modern infant research reinforce this and open up new directions vis-à-vis the life-long effect of early relationships (Fonagy and Target, 1998; Fonagy, 2001).

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5. At the same time, psychoanalysis is not only an interactive process for Ferenczi, but a type of *mutual creation*. In 1928 Ferenczi wrote: "[The analyst] has to let the patient's free association play upon him; simultaneously, he lets his own fantasy get to work with the association material" (Ferenczi, 1928, p. 96).

COMBINING THE INTRAPSYCHIC MODEL WITH THE INTERPERSONAL OBJECT RELATIONS APPROACH: SOME NEW VIEWS ON FERENCZI'S PARADIGM SHIFT

Ferenczi restores the validity of Freud's first trauma theory and supplements the intrapsychic model with interpersonal object relations approaches. In addition, Ferenczi stresses the presence or lack of a trusted person in post-traumatic situations. On the basis of Ferenczi's later works—with special emphasis on "Confusion of Tongues"—I will now attempt to reconstruct those points, which would become the building blocks of contemporary trauma theory.

1. *Trauma is a real event*. It is not fantasy that takes the place of real events; it is not fantasy that causes trauma.
2. *The experience is subjective*: Subjective truth is to be accepted by the psychoanalyst/psychotherapist. "Subjective truth" is a means of processing personal experience out of an individual's internal reality and out of the external reality of the surrounding world. As a result, the question of whether it is "right" or "wrong", "true" or "false" is simply misplaced. The analyst accepts the experiences related by the patient and does not question their truth content (Mészáros, 2002).
3. *The traumatic experience is composed of intrapsychic and interpersonal dynamic elements*. The process shows signs of a system of object relations. The motives of adults and children differ in the sexual seduction situation. The child's need for tenderness is misinterpreted and exploited by the adult; it is also spoiled to create space for his or her own erotic desires. At the same time, this points to the participants' ego defense mechanisms, as well as to the relationship that binds them.
4. *The strongest pathogenic factor is the introjection of the perpetrator's anxiety and guilt by the child*. Ferenczi writes that the child is paralyzed by great anxiety, the source of which is the anxiety and guilt of the perpetrators; this originates from the introjection of the adult's experience in the child.
5. *Identification with the aggressor*. In his "Confusion of Tongues", Ferenczi first described the defense mechanisms that come into play during traumatization, which differ for victim and aggressor. (a) On the part of the victim: Dissociation and identification with the aggressor's intentions, guilt and anxiety are taken in through introjection. (b) On the part of the aggressor: Bagatellization/minimization, projection, denial, pretence, etc.…

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In "Confusion of Tongues", Ferenczi is the first to describe the phenomenon of identification with the aggressor. In 1936, Anna Freud generalized the use of this term to describe identification with the aggressor within the framework of ego defense mechanisms. This is to say that the matter at issue is not merely the ego defense mechanism that comes into play during traumatization, but the arming of the child who feels threatened in a broader sense, with expressions characteristic of the aggressor through the introjection of the aggressor's traits (Anna Freud, 1936). Judith Dupont makes a clear distinction between Ferenczi's and Anna Freud's concepts of identification with the aggressor by pointing out that Ferenczi used it with reference to abused children, whereas Anna Freud understood it as an ego defense mechanism for so-called lesser aggression or fantasized aggression (Dupont, 1998). For my part, I believe that there exists no difference, in principle, in the functioning of the ego defense mechanism, that is in the ego defense provided by the introjection of the aggressor, even if the "field of application" ranges from the abuse suffered through lesser aggressions to the "possession" of the power and influence of the feared/desired authority. Ferenczi offers a clear description of the functioning of the mechanism: When anxiety

> reaches a certain maximum, it compels them [the victims] to subordinate themselves like automata to the will of the aggressor, … they identify themselves with the aggressor … . Through the identification … [the persecutor] disappears as part of the external reality, and becomes intra-instead of extra-psychic … . (Ferenczi, 1933, p. 162)

It is thus through Ferenczi that the *concept of identification with the aggressor is born in 1932*, which is one of the strongest defense mechanisms in the struggle to survive defenselessness in the face of aggression, life-threatening personal attacks and long-term captivity. Ferenczi seized upon a defense mechanism that goes beyond the protection that develops in situations of erotic seduction; in it we find one of the characteristic ego defense mechanisms of a survival strategy for a variety of aggressions, one that can be applied generally. *Identification with the aggressor* brings about a paradoxical situation: it ensures survival but at the price of perpetuating the traumatic situation, that is of allowing the possibility of repetition; taken *ad absurdum*, the aggression becomes acceptable and the aggressor is tamed.

6. *Dissociation*. Ferenczi writes extensively about the mechanism of *dissociation* on the part of the victim in his Clinical Diary (1988). The following vignette provides a clear illustration of dissociation from my clinical work:

> A nine-year-old girl had been sexually abused by her uncle for years. During therapy, when she was finally able to bring herself to face what had happened

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> one image came to her mind. She was laying on a bed, her uncle on top of her playing with the medal hanging from his neck, dangling it back and forth, back and forth … . This is what would later be described by so many writers as the experience that facilitates survival: that of watching a film in a trance. What is happening is not happening in quite that way or it is not happening to me at all. Emotions become detached from the events and dissociation serves as a means of survival.

7. *The realization of the pleasure principle in trauma*. As absurd as it may appear, the endurance of trauma also provides an answer to the question of why it is worthwhile for the victim to carry on the trauma and to withstand this condition. Ferenczi wrote that the intrapsychic process may even develop along the lines of the pleasure principle during dramatization: "… in the traumatic trance the child succeeds in maintaining the previous situation of tenderness" (Ferenczi, 1933, p. 162).

The advantage of the ego defense mechanisms is that they establish a new equilibrium—although at the expense of a pathogenic compromise. The greatest payoff of this compromise is that it guarantees that the loved person need not be given up on. There is a huge price to pay, however: the probability that the traumatic situation will repeat itself remains high. I should like to illustrate the extremely complex experience of the ambivalence of dread—desire, in an excerpt from a session of one of my patients:

> In her third year of analysis, a nearly forty-year old patient has often recalled the various details of her erotic relationship with her step-father. At this session, however, she augments the system of motives of her own participation with an element that has not yet been encountered.
>
> The antecedents in brief: from early childhood the patient was bound in a hateful relationship to her step-father, whom she feared because of physical abuse as well. When the patient was a teenager, her mother left her and her step-father alone in the house for several days. The girl was very much afraid of the possibility of physical abuse and thought a great deal about how she could ride out those days. Frightened, the usually sulky and reserved child chose an unusual strategy: she started smiling at her dreaded step-father. The father misunderstood the smile and began molesting the girl. When her mother returned home, the girl immediately told her what had happened, but her mother refused to believe it and sided against her, accusing her of making it all up to drive her husband away from her. The girl then became terribly frightened; she now felt that everyone had turned against her and looked on her as an enemy. Later, when the seduction continued, she first protested and then "gave in". Eventually, however, as these erotic situations repeated themselves, the girl was not only afraid of them, but at the same time desirous of them as well.
>
> After many years of recalling her traumatic experiences in psychotherapy, suddenly, in tears, she seized on an aspect that had not yet come up: the ambivalence of

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> it which had held her in that situation for long years. It was not just that the seduction by her step-father had presented the patient with a shining trophy of triumph over her mother, who had failed to protect her, but also that the erotic games had given rise to both dread and pleasure in respect of the "taming of the aggressor", on the one hand, and of her own sexual pleasure, on the other. As she speaks of these things, in tears, she bursts out: "It would have been so much better if [my step-father] had raped me because then I would have felt free to hate him".

8. *Post-traumatic condition*. In his oft-mentioned final lecture, "Confusion of Tongues", Ferenczi suggests the presence or lack of the trusted person in the post-traumatic condition. Is there somewhere for the child in trouble to turn or not? The role of the trusted person is of key importance in terms of the later fate of the traumatized individual—and this holds true not only for children, but also for the person suffering trauma in a general sense.

Perhaps I succeed in negotiating the trap of overgeneralization when I state that the intrapsychic outcome of trauma is determined in the post-traumatic situation—either with the presence of a trusted person or without. With a bit of simplification, we might say that the presence or lack of the trusted person decides the extent to which the traumatic experience affects the person and influences his or her fate in the long run. In general, lasting change in the eventual fate of the personality is not necessarily brought about even if there is a chance to share the events with others after the trauma. Here again we see the extraordinary importance of the social situation, the role of publicness, solidarity and the emotional and intellectual aid of a trusted person or people, all of which provide an opportunity to process the trauma. It is at this time that anxiety, guilt, feelings of shame and the experience of being both helpless and defenseless rapidly decrease. In the presence of a trusted other, trauma sufferers do not remain without help or alone and they are not isolated. The traumatic event does not become a secret and then a *taboo*, and the *process of transgenerational trauma* is not launched. Talking to the trusted person and sharing the traumatic experience represents the first step in working through the trauma. Those who have this chance early on are among the lucky ones.

The psychotherapist as witness

All of us psychoanalysts and psychotherapists are "witnesses of existence lived" of experiences undergone—we are the authenticators of traumatic experiences (Mészáros, 2003, p. 77). In psychotherapy, we become part of external reality, of publicness. We come to embody the trusted person in adulthood, the one that had been missing earlier. We become tools indispensable to processing and to a new beginning, professional partners, companions and supporters of correction for a person who has so far been forced to maintain damaged or false self-objects.

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NOTE

1. The Hungarian title announced for the lecture at the Wiesbaden conference in September, 1932 was "A felnöttek szenvedélye és hatása a gyermekek szexuális és karakterfejlödésére" (Adult passion and its effect on sexual and character development in children, *International Journal of Psychoanalysis,* Vol. XXX, 1949, 225). It was first published as "Sprachverwirrung zwischen den Erwachsenen und dem Kind. Die Sprache der Zärtlichkeit und der Leidenschaft" (*Internationale Zeitschrift für Psychoanalyse*, 1933, XIX, 5–15). Its first publication in English was as "Confusion of tongues between adults and the child. The language of tenderness and of passion". (*International Journal of Psychoanalysis*, Vol. XXX, 1949, 225–230). The first Hungarian-language publication was in *A pszichoanalízis és modern irányzatai* (Szerk: Buda Béla, Budapest, Gondolat, 1971, pp. 215–226). It was most recently re-published in *Technikai írások* (1921–1933). Animula, Budapest, 1997, 102–112.

REFERENCES

Balint, M. (1933). Character analysis and new beginning. In M. Balint (Ed.), *Primary love and psycho-analytic technique* (pp. 157–173). London: Tavistock Publ.

Borgogno, F. (2007). Ferenczi and Winnicott: Searching for a "missing link" (of the soul). *The American Journal of Psychoanalysis,* 67(3), 221–234.

Bowlby, J. (1973). *Attachment and loss. Vol. 2. Separation: Anxiety and anger*. New York: Basic Books.

Buda, B. (Ed.) (1971). *A pszichoanalízis és modern irányzatai (modern trends in psychoanalysis)*. Budapest: Gondolat.

Dupont, J. (1998). The concept of trauma according to Ferenczi and its effects on subsequent psychoanalytical research. *International Forum of Psychoanalysis, 7,* 235–240.

Ferenczi, S. (1899). Spiritizmus. *Gyógyászat, 39*(30), 477–479.

Ferenczi, S. (1908). Psychoanalysis and education. In *Final contributions to the problems and methods of psycho-analysis* (pp. 280–290). London: Maresfield.

Ferenczi, S. (1919). On the technique of psychoanalysis. In *Further contributions to the problems and methods of psycho-analysis* (pp. 177–189). London: Maresfield.

Ferenczi, S. (1928). The elasticity of psychoanalytic technique. In *Final contributions to the problems and methods of psycho-analysis* (pp. 87–101). London: Maresfield.

Ferenczi, S. (1933). Confusion of tongues between adults and the child. In *Final contributions to the problems and methods of psycho-analysis* (pp. 156–167). London: Maresfield.

Ferenczi, S. (1988) *The clinical diary of Sándor Ferenczi*. J. Dupont (Ed.), Cambridge: Harvard University Press.

Ferenczi, S. & Rank, O. (1924). *The development of psycho-analysis. Nervous and mental disease*. New York, Washington: Pub. Co., 1925, (Reprinted: International Universities Press, Madison, CT, 1986).

Fonagy, P. (2001). *Attachment theory and psychoanalysis*. New York: Other Press.

Fonagy, P. & Target, M. (1998). A kötődés és a reflektív funkció szerepe a szelf fejlődésében (Attachment and reflection in the development of the self). *Thalassa, 1*(9), 5–43.

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Frankel, J.B. (1998). Ferenczi's trauma theory. *American Journal of Psychoanalysis, 58*(1), 41–61.
Freud, A. (1936). *The ego and the mechanisms of defence*. London: Hogarth Press.
Freud, S. (1916–1917). Introductory lectures on psycho-analysis. *Standard Edition,* 15–16.
Freud, S. (1935). *An autobiographical study*, J. Strachey (Ed. and Trans.) New York & London: W.W. Norton & Company.
Freud, S. (1992). *The diary of Sigmund Freud 1929–1939: A record of the final decade*, M. Molnar (Ed. and Trans.) London: The Freud Museum.
Freud, S. & Breuer, J. (1893). On the psychical mechanism of hysterical phenomena. A lecture. *Standard Edition* (Vol. 3, pp. 25–39).
Haynal, A.E. (2002). *Disappearing and reviving. Sándor Ferenczi in the history of psychoanalysis*. London and New York: Karnac Books.
Herman, J.L. (1992). *Trauma and recovery*. New York: Basic Books.
Hoffer, A. (1996). Asymmetry and mutuality in the analytic relationship: Contemporary lessons from the Freud-Ferenczi dialogue. In P. Rudnitzky (Ed.), *Ferenczi's turn in psychoanalysis* (pp. 107–119). New York: New York University Press.
Horney, K. (1937). *The neurotic personality of our time*. New York: W. W. Norton & Co.
Kramer, R. (1997). Otto rank and "the cause". In T. Dufresne (Ed.), *Freud under analysis: Essays in honor of Paul Roazen* (pp. 221–247). Hillsdale, NJ: Jason Aronson.
Laplanche, J. & Pontalis, J.B. (1973). *The language of psycho-analysis*. London: Hogarth press.
Mahler, M.S. (1975). *The psychological birth of the human infant. Symbiosis and individuation*. New York: Basic Books.
Masson, J.M. (1985). *The complete letters of Sigmund Freud to Wilhelm Fliess 1887–1904*. Cambridge, MA: Belknap.
Mészáros, J. (Ed.) (1999). *Ferenczi Sándor a pszichoanalízis felé. Fiatalkori írások 1897–1908. (Ferenczi: Toward psychoanalysis. Works of the young Ferenczi)*. Budapest: Osiris Kiadó.
Mészáros, J. (2002). Ferenczi's Trauma Theory – Solving a Dilemma/Intra- and Interpersonal Dynamics of the Traumatization Process. In S. Varvin and T. Štajner-Popovic (Eds.) *Upheaval: Psychoanalytical perspectives on trauma*. (pp. 193–205). Belgrade: International Aid Network.
Mészáros, J. (2003). Szubjektivitás, interszubjektivitás az analitikus-páciens kommunikacioban. In Katalin Pethő (szerk). *Szexualitás a pszichoanalízis és a társadalomtudományok tükrében*. (pp. 71–78).
Mészáros, J. (2004). Psychoanalysis is a two-way street. *International Forum of Psychoanalysis, 13,* 105–113.
Spitz, R. (1945). Hospitalism: An inquiry into the genesis of psychiatric conditions in early childhood, I. *Psychoanalytic Study of the Child, 1,* 53–74.
Sullivan, H.S. (1953). *The interpersonal theory of psychiatry*. New York: Norton.
Thompson, C. (1988). Sándor Ferenczi, 1873–1933. *Contemporary Psychoanalysis, 24*(2), 187.
Winnicott, D.W. (1971). *Playing and reality*. Middlesex, England: Penguin.

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