THE PSYCHO-ANALYTICAL TREATMENT OF CHILDREN

Technical Lectures and Essays

by

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Preface

Part I of this series comprises a course of lectures given in 1926 before the Vienna Institute of Psycho-Analysis under the title *Introduction to the Technique of the Psycho-Analysis of Children* (1). Part II, which slightly amplifies the subject matter treated in this introductory series of lectures, was, soon afterwards, read as a paper at the Tenth International Psycho-Analytical Congress in Innsbruck, 1927 (2). Part III was written for *The Psychoanalytic Study of the Child*, 1945 (3), and attempts to summarise some of the advances in the understanding and evaluation of the infantile neurosis which the author has made in the intervening nineteen years of work on the subject.

The audience of the first five lectures was, in each instance, composed of practising and prospective analysts, and accordingly both subject and phraseology of the main part of the book are technical.

It is not the author's fault that the early material contained in this publication is presented to the English reader at such a late date. An English version of the *Introduction to the Technique of Child-Analysis* (4) was published in America. Attempts at publication in England were not successful. For the general publisher the subject matter was still too remote and controversial. Professional psycho-analytical circles in England, on the other hand, were at that time concentrating their interest on Mrs. Melanie Klein's new theory and technique of the analysis of children (5). The British Psycho-Analytical Society devoted a *Symposion on Child-Analysis* (6) to a severe criticism of the author's efforts, which ran counter to Mrs. Klein's outlook. The *Introduction to the Technique of the Analysis of Children* was rejected when offered to The International Psycho-Analytical Library for publication, and the matter lapsed, so far as England was concerned.

In Vienna, from 1927 onward, a group of analysts, later joined by colleagues from Budapest and Prague, held regular meetings with the author to discuss the technique of the analysis of children, as it emerged from these introductory lectures, to report on cases which were treated with this method, to compare results, and to clarify the theoretical background of the practical findings. The age range to which the technique

was found applicable was lowered from the latency period, as originally suggested, to two years, and extended at the other end to pre-adolescence and adolescence. All types of non-organic disturbances of childhood development were taken into treatment, from the usual phobias, hysterical illnesses, obsessional disturbances, bed-wetting, stammering, compulsive masturbation and exhibitionism, neurotic constipation, to grave abnormalities of a schizophrenic type (7-30). Analyses of delinquent children were attempted and carried out, in close co-operation with the work of August Aichhorn on juvenile delinquency which was developed and taught by him in Vienna at the same time (31-34).

Before these developments in the field of analytical therapy for children, Vienna had already been a fertile ground for the psycho-analytical study of normal child development, and for the application of this new knowledge to education. Students of the subject had for years been listening to the inspiring lectures for teachers and youth leaders given by Siegfried Bernfeld (39-42), and many young and enthusiastic workers had taken part in his experiment in education in "Kinderheim Baumgarten", a camp school for homeless children which formed part of the American relief work for children in the post-war period after 1918. In 1929 the author was commissioned by the School Inspectorate of the City of Vienna to give four lectures on psycho-analysis to the teachers of the Children's Centres of the City (50). This marked a further step in the co-operation between psycho-analysis and education, which from then onward developed freely in all its branches. Some members of the Vienna Institute of Psycho-Analysis devoted a fair share of their teaching and lecturing activity to consolidating the ground which had been gained. The Vienna Psycho-Analytic Society thus (besides training for the therapeutic analysis of neurotic and delinquent children) sponsored one Child Guidance Clinic for young children (directed by Edith Sterba), one Child Guidance Clinic for adolescents (directed by August Aichhorn); special discussion groups for teachers of the City who dealt with problem children in their own classrooms; and, organised by Dr. W. Hoffer, a three years post graduate Training Course for teachers who received instruction in psycho-analytical child psychology, and guidance in its application to their handling of children (35-38, 43-68). To these ventures was added in 1937 an experimental Day-Nursery for infants between one and two years of age, which was founded and maintained by Dr. Edith Jackson, New Haven, and organised by the author in conjunction with Mrs. Dorothy Burlingham, and with the medical help of Dr. Josefine Stross.

So far as Vienna was concerned, these activities ended with the political changes in 1938. Nearly all the participants in the work left Austria, to continue elsewhere. Both sides of the work, the therapeutic as well as the one applied to education, were pursued further in the new surroundings. Members of the former Vienna Seminars for Children's Analysis joined up, in Holland or America, with other analytic colleagues to form similar seminars and discussion groups, or, as in England, continued the work among themselves. Analytic Child Study and work with educators was welcomed in all countries, for in the meantime interest in the problems of upbringing of normal and abnormal children had gradually increased. Experimental Nurseries based on analytic principles came into being in Boston, Detroit and Los Angeles. The organisers of the Vienna Nursery, now in London founded and directed the so-called Hampstead Nurseries (69, 70), a Residential War Nursery, financed by the Foster Parents' Plan for War Children, Inc., New York, to which a three years' theoretical and practical Training Course for Children's Nurses and Teachers was attached.

The extensive work done in psycho-analysis applied to education had in time its welcome repercussions on the therapeutic analysis of children, and led to important modifications on the technical side. In 1926, before there was any systematic teaching of either parents, teachers, or children's nurses, the author was justified in saying that the children's analyst must "claim for himself liberty to guide the child . . ." (p. 45) and "accordingly combine in his own person two difficult and diametrically opposed functions: he has to analyse and educate, . . ." (p. 49). In 1946, after twenty years of intervening work with educators, such a statement is no longer legitimate. The children's analyst now shares his knowledge of the child's requirements with the workers in the field of education and upbringing, and accordingly his task has become easier. Whereas formerly he himself had to assume the "position of authority" (p. 45), he can now, with rare exceptions, concentrate his energies on the purely analytic side of the task, and count on the co-operation of enlightened parents, school teachers or nurses to supply the intelligent control and guidance of the child which are the indispensable accompaniment and counterpart of its analysis.

For reasons of another kind, certain statements made in the First Lecture on *An Introductory Phase in the Analysis of Children*, must be modified in the light of modern developments. In a study of the defence mechanisms of the ego (7), the author described ways and means to

uncover and penetrate the first resistances in the analysis of children, whereby the introductory phase of the treatment is shortened and, in some instances, rendered unnecessary. Berta Bornstein, in a recent publication (72), gives a useful and well illustrated account of the technical changes in the analysis of children which arise from the study of their various defence mechanisms.

The Second Lecture does not require similar modifications. The author's views on *The Methods of Children's Analysis* have to a large degree remained unchanged.

The opinions expressed in the Third Lecture, on *The Role of Transference in the Analysis of Children*, have during the last twenty years been repeatedly opposed by children's analysts in England and America who maintain that the children under their treatment show profuse signs of transference which is open to analysis in the same manner as in the analysis of adult patients. The author fully agrees that this is the case. But, in spite of these manifold and variegated transferred reactions of the child, the author has not, so far, met a single case of a child patient where the original neurosis was given up during the treatment and replaced by a new neurotic formation in which the original objects had disappeared and the analyst taken their place in the patient's emotional life. It is only a structure of this kind which deserves the name of transference neurosis. So far as the author's experience goes, the latter occurs solely in cases of adult neurotics who are treated with the classical technique applicable only to patients who have reached maturity.

PART I

Introduction to the Technique of the Analysis of Children (1926)

FIRST LECTURE

An Introductory Phase in the Analysis of Children

Ladies and Gentlemen. It is difficult to assert anything about the technique of the analysis of children without first making clear one's position on the question: in which cases would one in general consider that an analysis should be undertaken, and in which would it be better to refrain?

Mrs. Melanie Klein has as you know fully considered this question in her publications and in her lectures. She takes the view that any disturbance in the intellectual or other psychological development of a child can be resolved or at least favourably influenced by an analysis. She goes still further, and maintains that an analysis is of the greatest benefit also to the development of a normal child, and in the fulness of time will become indispensable to complete all modern education. On the other hand, it transpired in the course of a discussion at one of our meetings last year that the majority of our Viennese analysts take a different point of view, and maintain that the analysis of a child is only appropriate in the case of an infantile neurosis.

I am afraid that I am not going to be able to contribute much in the course of these lectures to the elucidation of this question. The most I can do is to give you an account of what cases I did undertake to analyse, and say in which of them this decision proved justified and in which the analysis came to grief owing to internal or external difficulties. It is natural that when one comes to make fresh decisions one is encouraged by a recent success and apt to be deterred by a failure. On the whole, I think one sometimes gets the impression in working with children that analysis is here a method too difficult, costly and complicated, that one does too much with it; contrariwise, in other cases, and that still more often, one feels that with pure analysis one accomplishes much too little.

It may thus happen that analysis, where children are concerned, requires special modifications and adjustments, or indeed can only be undertaken subject to certain precautions. Where then the introduction of these precautions is impracticable, the carrying out of an analysis may be inadvisable.

In the course of these lectures you will see from manifold examples the application of the foregoing remarks. I shall on purpose leave for the present on one side any attempt to take this question further, and shall concern myself with the technical process of the analysis of children in those cases where for some reason, which for the moment we shall not go into, it seems advisable to undertake that treatment.

In the last year I have several times been invited to give a report of an analysis of a child at one of the technical courses of our Society, and to examine in that connection the special technique of the analysis of children. Up to now I have always declined this request, for I was afraid that anything that one could say on this subject must seem to you banal and obvious. The special technique of the analysis of children, in so far as it is special at all, derives from one very simple fact: that the adult is—at least to a considerable degree—a mature and independent being, while the child is immature and not self-dependent. It is evident that to deal with such different subjects the method cannot remain uniform. Many of its elements, important and significant in an adult case, lose their importance in the new situation; the rôles of various expedients are shifted, and what was there a necessary and innocuous procedure becomes here perhaps risky. Such modifications however occur to everyone according to circumstances, and hardly require a special theoretical foundation.

In the last two and a half years however I have had the opportunity to conduct ten long analyses of children, and I shall try in what follows to arrange the observations which I was enabled to make in the way in which they would probably have impressed anyone amongst you under equally favourable circumstances.

We shall accordingly keep to the actual sequence of events as they occur in an analysis, and begin with the attitude of the child at the outset of the analytical work.

Let us consider first the analogous situation with an adult patient. A person feels that he is disturbed, in his work or his enjoyment of life, by some sort of difficulty within himself; he gains, on one ground or another, confidence in the therapeutical power of analysis or of some particular analyst; and he makes the decision to seek a remedy by this means. I know of course that the facts are not always altogether like this. It is not always exclusively the inner difficulties which are the motive for the analysis—frequently this is only provided by the conflicts with environment which arise from them. Again, the decision is not always made really independently; pressure from relatives or others often plays a rôle greater than is favourable for the later progress of the work. Nor is confidence in analysis and the analyst always a factor. But still it always remains for the treatment the wished-for and ideal situation, that the patient should of his own free will ally himself with the analyst against a part of his inward being.

This state of things is naturally never to be found amongst children. The decision for analysis never comes from the child who is to be the patient, but always from the parents or other persons round it. The child is not asked for its consent. If the question were put to it, it could hardly pronounce an opinion or find an answer. The analyst is a stranger, analysis itself something unknown.

But what constitutes an even greater difficulty is that in many cases the child itself is not the sufferer, for it often does not perceive the trouble in itself at all; only the persons round it suffer from its symptoms or outbreaks of naughtiness. And so the situation lacks everything which seems indispensable in the case of the adult: insight into the malady, voluntary decision, and the will towards cure.

This does not impress every analyst of children as a serious obstacle. You will be aware from Mrs. Melanie Klein's writings how she comes to terms with these circumstances and what technique she founds on them. To me, on the contrary, it seems that one ought to try whether one cannot produce in the child's case, too, the situation which has proved so favourable in the adult's, that is to say, whether one cannot induce in the child in some way the missing readiness and willingness.

I shall make it the subject of my first lecture to show you how in six different cases, of ages between six and eleven, I succeeded in making the small patient "analysable" in the sense of the adult, that is to say inducing an insight into the trouble, imparting confidence in the analyst, and turning the decision for analysis from one taken by others into its own. Children's analysis requires for this task a preparatory period which does not occur with adults. I must emphasize that everything which we undertake in this period has nothing to do with the real analytical work, that is to say there is as yet no question of making unconscious processes conscious or of analytical influence on the patient. It is simply a matter of converting an unsuitable situation into a desirable one, by all the means which are at the disposal of an adult dealing with a child. This time of preparation—the "dressage" for analysis one might properly call it—will last the longer, the further the original condition of the child is from that of the ideal adult patient which has already been described.

Such a task need not moreover always be very difficult; the step which has to be taken is often not a specially big one. I am reminded of the case of a little six-year-old girl who was sent to me last year for three weeks' observation. I had to determine whether the difficult, silent and unpleasing nature of the child was due to a defective disposition and unsatisfactory intellectual development, or whether we had here a case of an especially inhibited and dreamy child. Closer observation revealed the presence of a compulsion neurosis, unusually severe and well-defined for such an early age, together with acute intelligence and keen logical powers. In this case the introductory process proved very simple. The little girl already knew two children who were being analysed by me, and she came the first time to the appointment with her slightly older friend. I said nothing special to her, and merely left her to gain a little confidence in the strange surroundings. The next time, when I had her alone, I made the first attack. I said that she knew quite well why her two friends came to me, one because he could never tell the truth and wanted to give up this habit, and the other because she cried so often and was angry with herself for doing so; and I wondered whether she too had been sent to me for some such

reason. At that she said quite frankly "I have a devil in me. Can it be taken out?"

I was for a moment taken aback at this unexpected answer. Certainly it could, I said, but it would be no light work. And if I were to try with her to do it, she would have to do a lot of things which she would not find at all agreeable. (I meant of course that she would have to tell me everything).

She had a moment or two of earnest meditation, then she replied ,"If you tell me that it is the only way to do it, and to do it quickly, then I shall do it that way." Thereby of her own free will she bound herself by the essential rule of analysis. We ask nothing more of an adult patient at the outset. But further, she fully understood the question of the length of time necessary. When the three trial weeks were up her parents were undecided whether to leave her under analysis with me or to put her under other care. She herself however was very disquieted, not wanting to give up the hope awakened while with me that she would be cured, and kept insistently demanding that if she had to go I should rid her of her devil in the three or four days remaining. I assured her that this was impossible and that it would take a long time of working together. I could not make this intelligible to her with numbers, for although she was already of school age, on account of her numerous inhibitions she had as yet no knowledge of arithmetic. Thereupon she sat herself down on the floor, pointed at the pattern of my carpet, and said,"Will it take as many days as there are red bits? Or even as many as the green bits?" I showed her the great number of appointments that would be necessary by referring to the many medallions in the pattern. She fully grasped the point, and in the imminent decision did her part in persuading her parents of the necessity for a very long time of working with me.

You may say that in this case it was the gravity of the neurosis which lightened the work of the analyst. But I think that would be a mistake. I will give you an example of another case in which the introductory phase took a similar course, although there could have been no question of a real neurosis at all.

About two and a half years ago I made the analytical acquaintance of a difficult little girl of nearly eleven. She was from the well-to-do Viennese middle-class, but the relationships

in her home were unfavourable, for her father was weak and little concerned with her, the mother had been dead for some years, and her relationship with the father's second wife and a younger step-brother was unsatisfactory. A number of thefts by the child, and an unending series of crude lies and small and great concealments and insincerities had determined the step-mother, on the advice of the family physician, to seek the aid of analysis. Here the analytical treaty was equally simple. "Your parents cannot do anything with you," was the basis of the negotiations, "with their help alone you will never get out of the constant scenes and conflicts. Perhaps you will try the help of a stranger." She accepted me without more ado as an ally against her parents, just as the little compulsion-neurotic I described before did against her devil. The insight into the malady of the compulsion-neurotic was here clearly replaced by insight into the conflict; the factor actually common to both however was the amount of suffering, which in the first case sprang from inward causes and in the second from outer.

My next procedure in this second case was throughout that recommended by Aichhorn for the educational treatment of delinquent children. The probation officer entrusted with the case of such children, says Aichhorn, must first of all put himself on the side of the delinquent, and assume that the child is justified in its attitude to those about it. Only so will he succeed in working with his charge instead of against him. I might emphasize here that Aichhorn's position for this kind of work has considerable advantage over that of the analyst. He is authorised to interfere by the state or town, and he has behind him the authority of an official position. The analyst on the contrary, as the child knows, is commissioned and perhaps paid by the parents, and he always gets into an awkward position if he sets himself against his clients, even if it is in their own interest. In fact I never held the necessary consultations with this child's parents without feeling uneasy, and the analysis after some weeks, in spite of the best inherent conditions, finally came to grief on account of this unclarified relationship.

In these two cases at all events the preliminaries necessary for the beginning of a real analysis, the sense of suffering, confidence in analysis and decision in favour of it, were created

with little trouble. Let us now go to the other extreme, and consider a case in which none of these three factors was present.

This was a ten-year-old boy with an obscure mixture of many anxieties, nervous states, insincerities and childish perverse habits. Various small and one more serious theft had occurred in recent years. The conflict with his home surroundings was no open and conscious one, and on the surface any insight into his very uncomfortable condition, or any wish to change it, was not to be found. His attitude to me was one of thorough-going rejection and mistrust, his whole endeavour being directed to protecting his sexual secrets from discovery. Here I could not employ either of the two expedients which had proved feasible in the other two cases. I could neither ally myself with his conscious Ego against a split-off part of his nature (for he felt nothing of such a division), nor offer myself as a partner against his surroundings, to which so far as he was consciously aware he was attached by the strongest feelings. I clearly had to take another course, more difficult and less direct, for it was a question of creeping into a confidence which was not to be won directly, and forcing myself upon a person who was of the opinion that he could do very well without me.

I tried to do this in various ways. At first, for a long time, I did nothing but follow his moods and humours along all their paths and bypaths. Did he come to his appointment in a cheerful disposition, I was cheerful too; if he were serious or depressed, I was the same. Did he prefer, instead of moving about or sitting or lying down, to spend the hour under the table, I would treat it as the most natural thing in the world and hold up the tablecloth and speak to him under it. If he came with string in his pocket, and began to show me remarkable knots and tricks, I would let him see that I could make more complicated knots and do more remarkable tricks. If he made faces, I pulled better ones, and if he challenged me to trials of strength I showed myself incomparably stronger. But I followed his lead in every subject of talk, from tales of pirates and questions of geography to stamp-collections and love stories. In these conversations nothing was too grown-up or too delicate a subject for me to talk to him about, and not even his mistrustfulness could suspect an educational intention behind what I

said. My way was rather like that of a film or novel which has no other intention than to attract the audience or reader to itself, and with this aim concentrates on the interests and needs of its public. My first aim was in fact nothing else but to make myself interesting to the boy. That in this first period I became familiar at the same time with many of his interests and inclinations which lay near the surface was an accessory advantage.

After a time I brought in another factor. I proved myself useful to him in small ways, wrote letters for him on the typewriter during his visits, was ready to help him with the writing down of his daydreams and self-invented stories of which he was proud, and made all sorts of little things for him during his hour with me. In the case of a little girl who was undergoing her preparation at the same time I zealously crochetted and knitted during her appointments, and gradually clothed all her dolls and teddy bears.

To put it briefly, I developed in this way a second agreeable quality—I was not only interesting, I had become useful. As an accessory gain in this second period I had by means of the letter and story writing obtained an introduction into the sphere of his acquaintance and his fantasies.

Then however came something incomparably more important. I made him notice that being analysed has very great practical advantages, that for example punishable deeds have an altogether different and much more fortunate result when they are first told to the analyst, and only through him to those in charge of the child. And thus he got the habit of relying on analysis as a protection from punishment and claiming my help for repairing the consequences of his rash acts; he let me restore stolen money in his place and got me to make all necessary but disagreable confessions to his parents. He tested my abilities in this direction over and over again before he decided really to believe in them. After that however there were no more doubts; besides an interesting and useful companion I had become a very powerful person, without whose help he could no longer get along. Thus in these three capacities I had made myself indispensable to him. He was now in full dependence and in a transference relationship. I had however only waited for this moment to require of him in return—not in terms and

not all at one stroke—very energetic and comprehensive co-operation; namely the surrender, so necessary for analysis, of all his previously guarded secrets, which then took up the next weeks and months and with which the real analysis first began.

You observe that in this case I concerned myself not at all with the establishment of insight into the malady, which in later progress came of itself in quite a different way; here the problem was only the creation of a tie between us, which must be strong enough to sustain the later analysis.

But I fear from this detailed description you may think that there was nothing at stake but this tie. I will try to reduce this impression with the help of other examples which hold a middle course between the two extremes I have mentioned.

I was called upon to analyse another ten-year-old boy, who had recently developed a symptom which was very unpleasant and disturbing to those about him, namely noisy outbursts of rage and naughtiness, which broke out for no intelligible outward reason and were very strange in this otherwise inhibited and timid child. It was easy in this case to gain his confidence, for I was already known to him. The decision for analysis harmonised too with his own intentions, for his younger sister was already my patient, and jealousy of the advantages of her position in the family which she clearly derived from this fact made his wishes turn in the same direction. In spite of this I found no direct point of attack for the analysis; but the explanation was not far to seek. He had indeed so far as his anxiety was concerned a partial insight into the malady, and a certain desire to get rid of it and of his inhibitions. But for his main symptom, the rages, it was rather the contrary. Of them he was unmistakably proud, regarding them as something which distinguished him from others (if indeed not directly in a favourable sense), and he enjoyed the worry they caused his parents. He thus felt himself in a certain sense at one with this symptom, and would probably at that time have resisted any attempt to rid him of it with analytical help. But here I ambushed him in a not very honest way. I resolved to embroil him with that part of his nature, I made him describe the outbreaks as often as they came and showed myself concerned and thoughtful. I enquired how far in such states he was yet master of his action at all, and compared

his fits of rage to those of a madman who would be beyond my aid. At that he was startled and rather frightened, for to be regarded as mad naturally did not chime with his ambitions. He now tried himself to master these outbreaks, began to resist them instead of as earlier to encourage them; thereby he noticed his real lack of strength to suppress them and so felt an enhancement of his feelings of suffering and discomfort. After a few vain attempts the symptom finally, as I had intended, turned from a treasured possession into a disturbing foreign body, to fight which he only too readily claimed my help.

It will strike you that in this case I induced a condition which had been present from the beginning in the little compulsion-neurotic: a split in the child's inner being. In yet another case, of a seven-year-old neurotically naughty little girl, I determined on the same artifice at the end of a long preparatory period similar to those already described. I suddenly separated off all her naughtiness and personified it before her, giving it a name of its own and confronting her with it, and eventually succeeded in so far that she began to complain of the person thus newly created by me, and obtained an insight into the amount of suffering she had endured from it. The "analysability" of the child came hand in hand with the insight into the malady established in this way.

But we must not forget another limitation. I once analysed an unusually gifted and sensitive little girl who cried too easily. She wanted very much to get over this tendency with the help of analysis. But the work with me always stuck at a certain stage, and I was on the point of contenting myself with a minor amelioration. At that point there emerged clearly as an obstruction a tender attachment to a nurse, who was not friendly towards analysis; and our efforts, as they really came to penetrating the depths, struck upon it. The child indeed believed me as to what emerged from the analysis and what I said, but only up to a certain point—a stage to which she had allowed herself to go and where her loyalty to the nurse began. Whatever went beyond it struck upon a tenacious and unassailable resistance. She regressed in fact to an old conflict in the love-choice between her parents who lived apart, which had played an important rôle in her early childhood development. But this disclosure again did not really help, for the recent attachment to the person of her nurse was a thoroughly real and well-founded one.

Then I began a keen and sustained battle with the nurse for the child's affection, conducted on both sides with every possible expedient; in it I awakened her criticism, tried to shake her blind dependence, and turned to my account every one of the little conflicts which occur daily in a nursery. I knew that I had won, when one day the little girl told me again the story of such an incident which had affected her at home, but this time added "Do you think she's right?" Only from then on could the analysis penetrate the depths, and it led to the most promising result of all the cases I have mentioned.

The decision as to whether this method, the battle for the child itself, is permissible was in this case made without difficulty; the nurse's influence would have been bad not only for the analysis but for the whole development of the child. But consider how impossible such a situation is when one has as an opponent no stranger but the child's parents, or when one is faced with the question of whether it is worth depriving the child, in the interests of a successful analysis, of someone's really favourable and desirable influence. We shall return to this point in more detail when we consider the question of the prospects of the analysis of children and the relationship with the child's environment.

I shall conclude this subject with two more little stories, meant to show you how far the child is able to grasp the meaning of analytical work and of the therapeutical problem.

The best of them comes from the case of the little compulsion-neurotic. She recounted to me one day an unusually well-sustained battle with her devil, and suddenly demanded appreciation. "Anna Freud," she said, "am I not much stronger than my devil? Can't I control him very well by myself? I don't think I need you for it at all." I fully confirmed that. She was really much stronger, and without my help. "But I do need you," she said after pondering for a minute, "you have to help me not to be so unhappy at having to be stronger than it." I think that even from a grown-up neurotic one can expect no better understanding of the change he hopes for from analysis.

And now for the second story. My naughty ten-year-old

whom I have already described in detail, in a later period of his analysis got into conversation one day in the waiting room with one of my father's adult patients. This man told him about his dog, which had killed a fowl for which he, the owner, had had to pay. "The dog ought to be sent to Freud," said my little patient, "he needs analysis." The grown-up did not reply, but afterwards showed great disapproval. What odd sort of idea of analysis did the child have? The dog had nothing the matter with it; it wanted to kill the hen and it killed it. I knew exactly what the boy had meant. "The poor dog," he must have thought, "he wants so badly to be a good dog and something inside him forces him to kill hens."

As you see, insight into naughtiness had in the little neurotic delinquent shifted without difficulty into the place of insight into the malady, and thus provided a fully sufficient motive for analysis.

SECOND LECTURE

The Methods of Children's Analysis

Ladies and Gentlemen. I apprehend that my recent account of myself will have left an odd impression upon those among you who are practising analysts. My proceedings altogether, as I presented them to you, contradict at too many points the rules for the technique of psycho-analysis as laid down for us in the past.

Let us review once more the various things I did:

I gave the little girl a positive promise of cure, bearing in mind the consideration that one cannot demand of a child that with one who was previously a stranger it should follow an unknown path to an uncertain end; I fulfilled in this way her apparent desire to be compelled by authority and wrapped in security. I openly offered myself as an ally, and joined the child in criticising its parents.

In another case I embarked on a secret struggle with the home circle, and courted the child's affections in all possible ways.

To achieve my aim I exaggerated the possible gravity of a symptom, and frightened the patient.

And finally I crept into the children's confidence, and obtruded upon individuals who were firmly of the opinion that they could do very well without me.

Where in all this is the delicate restraint prescribed for the analyst; the prudence with which one holds out to the patient an uncertain prospect of the possibility of cure, or merely of amelioration; the scrupulous discretion in all personal matters; the absolute frankness in reviewing the malady; and the full freedom which one gives the patient to break off the mutual work whenever he likes of his own accord?

I must defend myself against the suspicion which has perhaps arisen in you, that I proceeded as I did in ignorance or

unintentional neglect of the prescribed rules. I maintain that I simply elaborated, to suit a new situation, the elements of an attitude which without stressing it particularly you all adopt in dealing with your patients.

Perhaps in my first lecture I exaggerated the difference between the child's initial situation and that of the adult. You know how insecure in the early days of an analysis seem the maintenance of resolution and the patient's confidence. We are in danger of losing him before he has begun the analysis at all, and we only feel that our proceedings are on sure ground when we have him firmly in the transference relation. In these first days however we work upon him, almost imperceptibly and without noticing that we are taking any special pains, in a number of ways which are not so very different from my laborious and apparently distinctive methods with children.

Take for example a melancholic patient. It is true that analytical therapy and technique are not directly designed for such cases, but if one is undertaken a preparatory period of this kind must be inserted, in which the patient's interest and resolution for the analytical work is awakened by the analyst's sympathy and by his entering into his personal needs.

Or take another case. Technical precepts warn us, as you know, against interpreting dreams too early and thereby offering the patient knowledge of his inner processes which he can only reject instead of understanding. But with an intelligent and educated compulsion neurotic who doubts everything, we may be glad to be able to offer him, at the very outset of the treatment, an especially happy and impressive dream-interpretation. Thereby we interest him and satisfy his exacting intellectual demands—and at bottom we are doing nothing else but what the children's analyst does, when he shows a boy that he can do much cleverer tricks with a piece of string than he can himself.

Another analogy is to be found in the way in which we show ourselves to be on the side of the rebellious and delinquent child and ready to help him against his world. We show the adult neurotic too that we are there to help and support him, and we take his part exclusively in all conflicts with his family; proving ourselves thus to be useful.

Moreover the factor of power and external authority plays a part. Observation shows that the experienced analyst with a reputation finds it much easier to hold his patient and to save him from "absconding" in the early stages than the young beginner; and towards him less "negative transference" and indications of hostility and mistrust are evinced. We ascribe this difference to the young analyst's inexperience, his lack of tact in his demeanour towards the patient, his precipitation or over-caution in interpretation. But I believe that just here one should take into account the factor of external authority. The patient asks himself, not without reason, who this man is after all, who suddenly claims to exercise such prodigious authority over him; and whether his claims are justified by his position in the world and the attitude of other, normal, people towards him. This is not necessarily a matter of the recrudescence of old hostile impulses, but rather perhaps a stirring of critical commonsense before the patient lets himself slide into the analytical transference situation. But the eminent analyst with a name and position obviously enjoys, by virtue of the esteem in which he is held, the same advantages as the children's analyst, who in any case is bigger and older than his little patient, and who becomes a person of undoubted power when the child feels that his authority is put by the parents even higher than their own.

Thus these features might be regarded as the elements of an introductory phase of the treatment, such as I have already described, with adults as well as children. But I think I am expressing myself on this incorrectly. It would be more appropriate to say that in the technique of the analysis of adults we find *vestiges* of all the expedients which prove necessary with children. The extent to which we use them will depend upon how far the adult patient with whom we are dealing is still an immature and dependent being, approximating in this respect to a child.

So much for the introductory phase to the treatment, the establishment of the analytical situation. In what follows let us suppose that the child, by all the foregoing means, has really won confidence in the analyst, possesses insight into the malady and is now striving of its own accord for a change in its condition.

So we come to our second theme—an examination of the means at our disposal with a child for the analytical work proper.

In the technique of analysis of adults we have four such expedients. We turn to account anything which the patient's conscious memory can furnish for the establishment of as complete a history of his malady as possible; we employ dream interpretation; we assess and interpret the ideas brought up by the patient's free association; and finally through the interpretation of his transference-reactions we obtain access to all those parts of his past life which can be translated into consciousness in no other way. I must inflict upon you in what follows a systematic examination of these expedients in their applicability to and utility for the analysis of children.

In the construction of the case history from the patient's conscious memories we come across the first difference. In adult cases, as you know, we refrain from bringing in any information at all from the patient's family and rely entirely upon what he can tell us himself. This voluntary restriction is based on the fact that communications imparted by the relatives are apt to be unreliable and incomplete, and take their colour from the relatives' personal attitude towards the sufferer. But a child cannot contribute much to the history of its malady. Its memory until one comes to its aid with analysis, does not reach far back. It is so taken up with the present that the past pales in comparison. Besides, it does not know itself when its abnormality began and when its nature first appeared to be different from that of other children. It has as yet little notion of comparing itself with others, and still less of self-appointed tasks by which it can measure its failures. Thus a children's analyst must in practice take the case history from the patient's parents. There is nothing else for it but to make all possible allowance for inaccuracies and misrepresentations arising from personal motives.

Contrariwise, we have in dream interpretation a field in which we can apply unchanged to children the methods of analysis of adults. During analysis the child dreams neither less nor more than the grown up, the transparency or obscurity of the dream content conforms as in the case of adults to the strength of the resistance. Children's dreams are certainly

easier to interpret, if indeed they are not always so simple as the examples given in *The Interpretation of Dreams*. We find in them every such distortion of wish-fulfilment as corresponds to the complicated neurotic organisation of the childish patient. But there is nothing easier to make the child grasp than dream interpretation. At the first account of a dream, I say "No dream can make itself out of nothing; it must have fetched every bit from somewhere"—and then I set off with the child in search of its origins. The child amuses itself with the pursuit of the individual dream elements as with a jigsaw puzzle, and follows up the separate images or words into real life situations with great satisfaction. Perhaps this comes about because the child still stands nearer to dreams than the adult; it may again be merely because it feels no surprise to find a meaning in dreams, not having heard the view that they have no meaning. In any case it is proud of a successful dream interpretation. And moreover I have often found that even unintelligent children, who in all other points were as inapt as possible for analysis, did not fail in dream-interpretation. I have conducted two such analyses for an extended period almost exclusively by using dreams.

But even where the associations to the child's dreams fail to appear, an interpretation is nevertheless often still possible. It is so much easier to know the child's situation, the daily happenings and significant people in its life. Often one may venture to insert the missing ideas into the interpretation from one's own knowledge of the situation. The two following examples of children's dreams, will merely serve to illustrate these circumstances.

In the fifth month of the analysis of a nine-year-old girl I eventually arrived at the discussion of her masturbation, which she could only admit even to herself with a strong feeling of guilt. She felt very hot sensations when masturbating, and her revulsion against her handling of her genitals extended to these feelings. She began to be afraid of fire and rebelled against wearing warm clothes. She could not see the flame burning in a gas water heater next her bedroom without fearing an explosion. One evening when the mother was away the nurse wanted to light the heater, but did not know how and called the elder

brother to help. But he did not know how either. The little girl stood by and had the feeling that she ought to know how. The following night she dreamed of the same situation, but in the dream *she actually did help, but did it wrong and the heater exploded. As a punishment the nurse held her in the fire so that she would burn up.* She woke up in a great state of anxiety and awakened her mother at once to tell her the dream, adding (from her analytical knowledge) that it was certainly a punishment dream. She brought up no other ideas, but I could easily supply them in this case. Manipulating the heater stood for manipulating her own body, which she assumed her brother did too. "Doing it wrong" was the expression of her own condemnation, and the explosion probably represented her form of orgasm. The nurse, who was the natural person to admonish against masturbation, appropriately carried out the punishment.

Two months later she had another fire-dream with the following content: "*On the radiator there were two bricks of different colours. I knew that the house was going to catch fire and I was frightened. Then somebody came and took the bricks away.*" When she woke up she had her hand on her genitals.

This time she associated an idea to a part of the dream, the bricks; she had been told that if you put bricks on your head you do not grow. From that the interpretation could be completed without difficulty. Stopping growing was one of the punishments for masturbation which she feared, and we recognised the significance of fire as a symbol of her sexual excitation from the earlier dream. Thus she masturbated in her sleep, was warned by the remembrance of all the prohibitions, and was frightened. The unknown person who took away the bricks was probably myself, with my soothing reassurances.

Not all dreams occurring in the analysis of children present so few difficulties in interpretation. But on the whole my little compulsion neurotic was right when she would announce to me a dream of the preceding night as follows: "To-day I have a funny dream to tell you, but you and I will soon find out what it all means."

The interpretation of daydreams as well as of ordinary dreams plays an important part in the analysis of children. Several of the children with whom I gained my experience were

great daydreamers, and the retailing of their fantasies became of the greatest assistance to me in analysis. It is usually very easy to induce children to recount their daydreams, once one has gained their confidence in other matters. They tell them more readily and are clearly less ashamed of them than adults, who condemn daydreaming as "childish." While the adult, from these considerations of shame and condemnation, usually only brings his daydreams into the analysis at a late stage and hesitatingly, in a child's analysis their appearance is often of great assistance in the difficult early stages. The following examples will give you three types of such fantasies.

The simplest type is the daydream as a reaction to an experience in the day. The little girl for example, whose dreams I have just mentioned, at the time when competition with her brothers and sisters was playing a part of great importance in her analysis, reacted to a supposed slight setback with the following daydream: "*I wish I had never come into the world at all, I wish I could die. Sometimes I pretend I do die, and then come back into the world as an animal or a doll. But if I do come back into the world as a doll, I know who I mean to belong to—a little girl that my nurse was with before, who is specially nice and good. I want to be her doll and I would not mind at all being treated like they treat dolls. I would be a dear little baby and they could wash me and do anything to me. The little girl would like me best of all. Perhaps she would get another doll for Christmas but I would still be her favourite. She would never prefer any doll to the baby doll.*" It is superfluous to add that of her brothers and sisters the two of whom she was particularly jealous were younger than her. Her current situation could not find clearer expression in any account or association than it did in this little fantasy.

The six-year-old compulsion neurotic lived at the beginning of her analysis with friends of her family. She had one of her fits of naughtiness, which was much criticised by the other children. Her little girl friend even refused to sleep in the same room with her, which upset her very much. She told me in the analysis however that she had been good, that the nurse had given her a present of a little toy rabbit, and assured me at the same time that the other children liked sleeping with her very much. Then she recounted a daydream which

she had suddenly had while she was resting. She had not felt at all that she was making it up. "*Once upon a time there was a little rabbit, whose family were not at all nice to him. They were going to send him to the slaughterhouse and have him slaughtered. But he found it out. He had a car which was very old but could still be driven. He went for it at night and got in and drove away. He came to a dear little house in which a little girl* (here she used her own name) *lived. She heard him crying downstairs and came down and let him in. Then he stayed to live with her.*" Here the feeling of not being wanted, which she would willingly be spared both in my eyes and her own, shows itself quite transparently. She herself is twice present in the daydream—as the little unloved rabbit and as the little girl who treats him as well as she herself would like to be treated.

A more complicated second type is the continued daydream. With children who compose such "serial story" daydreams it is often very easy to get on such terms that even in the earliest part of the analysis they will daily retail the new instalment. The current inward situation of the child can be reconstructed from these day-by-day continuations.

As an example of a third type I will mention a nine-year-old boy, whose daydreams, though certainly constructed with varying people and circumstances, repeated in innumerable situations the same outcome. He began his analysis with the narration of an abundance of such stored-up fantasies. In many of them the two principal personages were a hero and a king. The king threatened the hero, wanting to torture and slay him, and the hero escaped him in all possible ways. All technical inventions, especially an air fleet, played a great part in the pursuit. A cutting machine, which sent out sickle-like knives on each side when in motion, was also of great importance. The fantasy ended with the hero victorious, and doing everything to the king which the king wanted to do to him. Another of his daydreams depicted a teacher who punished and beat the children. The children eventually surrounded and overpowered her, and beat her to death. Still another had to do with a whipping-machine, in which in the end the torturer was locked instead of the captive for whom it was intended. He still possessed in his memory a whole collection of such fantasies with endless

variations. Without knowing anything more about the boy we can divine that all these fantasies are based on the defence against and revenge for a castration-threat; that is to say, the castration is to be carried out in the day dream on the very person who originally threatened it. You will agree that with such a beginning one can anticipate much of the later progress of the analysis.

A further technical auxiliary, which besides the use of dreams and daydreams comes very much to the fore in many of my analyses of children, is drawing; in three of my cases this for a time almost took the place of all other communications. Thus the little fire-dreamer, at the time when she was occupied with her castration complex, incessantly drew pictures of a fearful-looking monster in human shape, with protruding chin, long nose, an infinity of hair, and a frightful set of teeth. The name of this constantly recurring monster was "Bitey," and his function was clearly to bite off the male genital which he himself had developed in such manifold fashion on his own body. Another series of drawings which she made in great quantity during her visits, either as an accompaniment to her stories or in silence, portrayed all sorts of beings, children, birds, snakes and dolls, all with enormously extended arms and legs or beaks and tails. On another page in the same period she assembled all of a sudden all the things she wanted to be: a boy (so as to possess a male member), a doll (so as to be the best-beloved), a dog (which to her represented virility), and a sailor boy, whom she took from a fantasy in which she as a boy accompanied her father on a voyage round the world. Above all these figures was yet another drawing from a half-heard and half-invented fairy story—a witch pulling out a giant's hair; thus again a representation of castration for which at this time she blamed her mother. In strange contrast to this was a series of pictures from a much later period, in which a queen presented to a little princess standing before her a marvellous long-stemmed flower (obviously another penis-symbol).

The little compulsion-neurotic drew pictures of another kind. She occasionally accompanied her anal fantasies, which took up the first part of her analysis, with illustrations. For example, she portrayed an anal land of Cockayne, in which in-

stead of the mounds of porridge and tarts of the fairy story the people had to eat their way through a monstrous accumulation of pats of excrement arranged in rows. Besides that however I possess a series of most delicately coloured pictures of flowers and gardens, which she painstakingly executed with much neatness and grace while retailing to me her very "dirty" anal daydreams.

But I fear that I have sketched for you, thus far, too ideal a picture of the conditions obtaining in the analysis of children. The family readily furnishes all requisite information; the child is disclosed as an eager dream-interpreter bringing a rich outpouring of daydreams and furnishing a series of interesting drawings, from all of which conclusions as to its unconscious impulses may be drawn. If all this is so, it is puzzling to see why the analysis of children has always been felt to be so difficult, or why so many analysts declare that they can make no headway in the treatment of children.

The solution is not far to seek. The child cancels all the foregoing advantages by reason of the fact that it refuses to associate. The analyst is thus plunged into perplexity, for the very method on which the analytical technique is founded becomes to all intents and purposes useless. It is obviously contrary to a child's nature to assume the easy recumbent position prescribed for the adult, to expunge by an effort of its own will all criticism of emerging ideas, to exclude nothing from its communications, and so to explore the surface of its consciousness.

It is indeed true that when one has attached a child to oneself in the ways I have described, and made onself indispensable to it, one can make it do anything. Thus for once in a way it will occasionally associate on being invited to do so, for a short time and to please the analyst. Such an interpolation of associations may certainly be of the greatest use and bring sudden enlightenment in a difficult situation. But it will always be of the nature of temporary assistance and not the secure basis on which the whole analytical work can be founded.

I could sometimes ask one little girl, who in analysis proved particularly docile and amenable to my wishes and who with her great talent for drawing was especially visually perceptive, to "see pictures." She would then sit herself down in a remarkable crouching attitude and follow attentively her inward images. In this way she once actually gave me the solution to a long drawn-out resistance situation. The preoccupation of that period was the struggle over masturbation and the detachment from her nurse, to whom she had retreated with redoubled affection so as to defend herself against my efforts at liberation. I asked her to see pictures and the first answer was "Nurse is flying away over the sea." This, with the addition of a vision of myself surrounded by a lot of dancing devils, meant that I would be sending the nurse away; and then she would have no defence against her masturbatory impulses and would be made "wicked" by me.

Here and there, and more frequently than these deliberate and invited associations, others, unintentional and uninvited, come to our help. I take the little compulsion-neurotic again as an example. At the climax of her analysis it was a matter of elucidating for her her hatred of her mother, against the knowledge of which she had previously defended herself by the creation of her "devil" as the impersonal deputy for all her hate-impulses. Although up to now she had co-operated readily, she began at this stage to shrink from further progress. At the same time however she relapsed at home into all manner of insolent naughtiness, from which I daily proved to her that one could only hate anyone to whom one behaved so badly. Finally she surrendered outwardly before these constantly recurring proofs, but demanded to know from me also the reason for such a hostile feeling towards her apparently well-loved mother. Here I declined to give further information, for I too was at the end of my knowledge. Thereupon after a moment's silence she said, "You know, I believe it is the fault of a dream I once had" (some weeks before) "that we never understood." I asked her to repeat it, which she did: "*All my dolls were there and my rabbit as well. Then I went away and the rabbit began to cry most dreadfully; and I was so sorry for it.* I believe I am always copying the rabbit now, and that is why I keep crying like it did." In reality of course it was the other way round—the rabbit copied her, not she the rabbit. In that dream she herself had taken the mother's place, and treated the rabbit as she had been treated by her. With this dream idea she had finally found the reproach

which her consciousness always shrank from making towards her mother: that she had always gone away just when the child most needed her.

Some days later she repeated the process a second time. I pressed her, when her whole outlook had clouded over again after a temporary clearing, to contribute more on the same subject. She could not do so, but said suddenly in deep thought "It is so lovely at G.—, I should like so much to go there again." On closer question it became apparent that in a holiday in that place she must have passed one of her unhappiest times. Her elder brother had been sent back to his parents in the town because he had whooping cough, and she was isolated with the nurse and two younger children. She added spontaneously, "The nurse was always cross when I took the toys away from the little ones." Thus at that time the actual preference of the nurse for the younger children was added to the supposed preference of the parents for the brother. She felt herself neglected on all sides and reacted in her own way. And now she had again found one of her deepest reproaches against her mother through a recollection, this time of the beauty of the countryside in that place.

I would not emphasise these three cases of surprising associations if such things occurred more frequently in the analysis of children. In analysing adults they are, of course, the rule.

This absence of the will to associate in children has led everyone who up to now has been concerned with the problem of children's analysis to seek for some substitute or other. Dr. Hug-Hellmuth attempted to replace the knowledge obtained from an adult patient's free associations by playing with the child, seeing it in its own circle, and trying to become familiar with all its intimate daily circumstances. Mrs. Melanie Klein substitutes for the adult association technique the play technique with children described in her publications. She starts from the premiss that action is more natural for a little child than speech, and puts at its disposal a host of tiny playthings, a world in miniature, so that it can act in the playworld. She puts all the actions which the child carries out in this way on a par with the adult's spoken ideas, and attends them with interpretations as we are used to do with adult patients. It looks at first sight as

though a distressing gap in the technique of children's analysis had been filled up in an unobjectionable way. I wish to reserve however for my next lecture an examination of the theoretical foundation of this play-technique, and to set it in relation to the last aspect of our present subject, the rôle of transference in children's analysis.