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The History of Feminism and Interpersonal Psychoanalysis*

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I HAVE TWO MEMORIES of Ruth Moulton. These memories, spanning twenty years, say as much about me, my sense of changes in the culture, and the status of women as they do about Ruth Moulton.¹ As such, they also provide my own starting point for this essay—an inquiry into the evolution of feminist interpersonal psychoanalytic theory and theorists.

My first memory is not of a specific moment, but of a cluster of impressions of Dr. Moulton seen from afar in the early 1970s at the William Alanson White Institute. I was a graduate student at the time and would anxiously frequent the Friday night colloquia at the Institute. I always felt a bit out of place then, self-conscious and in awe of the “real,” “grown up” analysts who might one day have a say in my future. There weren’t many women faculty and supervisors then, although there were certainly more professional women than I was used to seeing collected in one place. I was especially conscious of the women as I scanned the room in search of role models: Anna Antonovsky, Marianne Eckardt, Geneva Goodrich, Anna Gourevich, Janet Jeppson, Ruth Moulton, Natalie Shainess, Rose Spiegel, Alberta Szalita, Ann Ruth Turkel; and from the next generation, Leah Davidson, Harriet Field, Gloria Friedman, Elaine Grimm, Roberta Held-Weiss, Helene Kafka, Marylou Lionells, Carola Mann, Marcia Rosen, Anita Tenzer, Hazel Weinberg. My search was accompanied by a fear that these “real” women might recognize me as an impostor, a girl (cf. **Dinnerstein, 1976; Riviere, 1927; Horner, 1972; Horner & Walsh, 1974; Symonds, 1971**). I believed that these older female analysts would not be taken in by me, that they could see through me.

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¹ The intersection of the author's life and her subject has been the focus of considerable attention among women writing women's lives. It is specifically addressed in Ascher, De Salvo, and Ruddick (1984).

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Not that I said anything at these meetings. No. I stayed very still and hoped to be inconspicuous and not be asked to leave. My earlier weekend ritual of dressing up and going to synagogue had been replaced by this equally formal occasion—in both situations I feared being scrutinized by my elders.

I remember perceiving Dr. Moulton at this time as a tall, aloof woman, who must have been exceedingly beautiful in her youth. I don't remember what she said at those meetings, or whether she spoke at all, just that she seemed to belong and I consequently viewed her with the awe I reserved for women who had completed medical school at a time when women were so unwelcome there. It's hard to believe today, when half the students in medical school are women, that in the sixties and early seventies, women accounted for only 9 percent of medical students (**Drachman, 1986**).

My second memory is of interviewing Dr. Moulton in her home in 1989, at which time I saw her from a very different perspective. In her seventies by then and recently widowed, she seemed frail, while I was then in my early forties, entering my professional prime. I no longer viewed her as someone who might sit in judgment of me, but as a member of a generation of women who now had been followed by younger women, many of them unabashed feminists, able to build on their predecessors' achievements. By the time of that meeting, I had friends and colleagues writing theory, giving their own papers at colloquia, and speaking up readily—I had even done this myself. I was saddened when I left that meeting with Ruth Moulton. I missed feeling intimidated and experienced my newfound tenderness toward her as another sign of growing up. My own mother, an academic several years Moulton's junior, had recently died and I was acutely aware of the passage of time and of generations.

But more was at stake. Much had changed between those first impressions in the early 1970s at the White Institute colloquia and our meeting in 1989, not only in my personal and professional life, but also in the status of women in the United States. At the latter meeting Moulton lent me a copy of an edited book that contained an article she had written on Clara Thompson (**Moulton, 1986**), the subject of my interview with her that day. The book, *Women Physicians in Leadership Roles*, was rightly a source of pride for Moulton. This book awakened me to the history of women in medicine in the United States. At the time of this meeting I was working on a biographical study of Clara Thompson, and

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I was already thinking about feminism and psychoanalysis. But this collection opened up another dimension of the

story by addressing the nonlinear progress of women in medicine, a topic to which I return later.

In the present essay, prompted by the occasion of an issue of *Contemporary Psychoanalysis* dedicated to the memory of Ruth Moulton, I look at the changing experiences of women psychoanalysts, specifically those identified with the interpersonal tradition, and their theoretical writings about women. I seek to understand my transference reactions to Dr. Moulton at those meetings, to better understand the impact of changes in women's roles and changes in our culture on the work of her generation of female interpersonal analysis, and to grasp the feelings they inspired in my generation. In this sense, my attempt to understand my reactions to Dr. Moulton is a variation on the theme of one of her final papers, "The Effect of the Mother on the Success of the Daughter" (Moulton, 1985a).

If generations are viewed in twenty-year increments, I can say that I was analyzed, supervised, and taught by the generation of analysts that included Ruth Moulton and the generation that immediately succeeded her. Many analysts in Moulton's generation were analyzed or supervised or both by Clara Thompson. While some of the analysts included in Moulton's cohort—for example, Alexandra Symonds—would certainly consider themselves feminists, others, both male and female, would not.

In exploring the history of feminism and interpersonal psychoanalysis, I am using the concept "feminism" in several ways. One use is feminism as a political movement that has changed the lives of women and their opportunities for education, work, a political voice, sexual pleasure, financial independence, power, and authority.

Another use of "feminism" is as a force leading to the reconsideration of clinical and diagnostic issues: political feminism as it applies to clinical diagnosis and treatment. This includes, for example, the redefinition of male violence and aggression toward women, work on rape, date rape, domestic violence, battered women, sexual abuse of children, and incest. (e.g., Alpert, 1996; Bass, 1988; Crewdson, 1988; Finkelhor, 1979; Herman, 1992; Masson, 1984; Russell, 1986; Schneider, 2000; Walker, 2000). In addition, feminists have raised questions regarding the rate of depression in women, the willingness to institutionalize women (Chessler, 1972), and the preponderance of women who received the diagnosis of borderline personality disorder, many of whom were adult survivors of childhood physical and sexual abuse (Gunderson & Sabo, 1993). And here I

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would also include the changing views of normal moral and cognitive development. These views had emerged from sampling techniques that only included males in the original subject pool. Results obtained this way were then simply extended to women (Gilligan, 1982; Belenky, Clinchy, Goldberger & Tarule, 1986).

Feminism as a theoretical discipline has both enriched psychoanalytic theorizing and been enriched by it. Feminist psychoanalytic theory has been specifically enhanced in the last thirty years by academic feminist scholarship in many fields, including history, sociology, anthropology, philosophy, biology, and empirical psychology.

From its inception, psychoanalysis as a profession was exceptionally open to women. The first generation that pursued training included Lou Andreas Salome, Helene Deutsch, Marie Bonaparte, and Karen Horney. It was clear that despite early Freudian views about women's proper, mentally healthy place—in the home, with children—women were given the opportunity to excel within psychoanalysis. Fortunately, Freud seemed comfortable with the contradictions between his written opinions of women who pursued careers and his willingness to train and refer to his female colleagues.

In the first decades of the twentieth century only a small percentage of women chose to pursue higher education at all, and medical or psychoanalytic training in particular. Often they had to move away from home in order to find a university that would admit women students, and often they had to go against the will of at least one parent. Some, such as Horney and Fromm-Reichmann, had mothers who fought for their daughters' freedom to pursue an education. Others, including Clara Thompson, had to struggle against their mothers' wishes. Thompson became estranged from her mother for many years.

Despite their struggles, most of these women did not think of themselves as feminists. The tag "feminist" was then and still is considered pejorative by some women, including those whose lives might be considered prototypical of the "new" woman. Even those women who were interested in the political feminism of the early twentieth century, and in that sense identified as feminist, didn't necessarily criticize classical Freudian views of women.

Chodorow (1989), in her study of early women analysts, warns of the danger of asking these pioneering women questions about gender consciousness that are by definition framed by our present realities, those of second-wave feminism. In her study, Chodorow realized that her ideas,

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as well as her subjects, "were rooted in ... different social and cultural conditions, that differences in women's interpretations of a situation may be understood not only in terms of structural categories like class and race but also historically, culturally and generationally" (p. 200).

In this essay I explore these generational differences further. To do this I investigate a number of themes that overlap and intersect in the development of interpersonal feminist psychoanalytic thought, I begin by introducing these themes and offer some general background for each.

The History of Political and Theoretical Feminism in Europe and America during the Last Century

By “political” I mean pragmatic, action-oriented feminism as seen in the quest for suffrage, birth-control and abortion rights, equal employment, and educational opportunities. These political movements were often precipitated and supported by theoretical and “scientific” discussions of the similarity or difference in women's ability to participate in the public sphere, in their sexual desires and experiences, and in their intellectual and moral capacities.

The Public Sphere

Laqueur (1987, 1990) and Rothman (1978), in quite different ways, illustrate how science was used to justify women's exclusion from public life. Rothman traces the history of women and higher education in the United States and how women's colleges initially emphasized physical activity in an effort to counteract the view that women would be physically harmed by intellectual activity. Until the end of the nineteenth century many doctors argued that intellectual activity was bad for women's health. In 1887, when Charlotte Perkins Gilman was released from a sanitarium she was instructed, “Live as domestic a life as possible.... Have but two hours' intellectual life a day. And never touch pen, brush or pencil as long as you live” (Bernikow, 1997, pp. 153-154).

Sexual Desires and Experience

The first generation of American feminists, the suffragettes, with the exception of Victoria Woodhull, argued that women had weaker sexual desire than men and were the “purer” sex. They sought women's protection from male lust and aggression, abuse of alcohol, as well as arguing

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that society in general, and men in particular, would be better off with the taming influence of women. By the turn of the century, many women were drawn to Freud's writings because he acknowledged the importance of women's sexual desires. Later, feminists criticized Freud for repudiating his ideas about the frequency and negative impact of sexual abuse of girls, on the one hand, and for not encouraging active adult female sexuality, on the other. Contemporary feminists are split between those like Susie Bright (2000) and Annie Sprinkle (1998, 2001), who are all for exploring and increasing the possibilities of sexuality, and those like Andrea Dworkin (1987, 1989) and Catherine MacKinnon (1988; MacKinnon & Dworkin, 1998) who condemn pornography and at times seem to herald a new Puritanism.

Emotional, Intellectual, and Moral Capacities

In both political and theoretical feminism there is an ongoing debate between the “difference feminists,” who valorize women and their experience, which they view as essentially different from men's experience, and the “egalitarian/gender critique feminists,” who challenge essentialist thinking about both men and women. This division of feminists was originally noted by Dimen (1995), who coined the term “gender critique feminists” in the course of laying out the debate. Theories about sexual and gender difference have a long history. A study of this history offers compelling evidence for the social construction of beliefs, not only in the social sciences, but also in medicine and other “hard” sciences. Laqueur (1987, 1990) offers a fascinating account of the impact of the Enlightenment on views of sexual difference. Jonathan Ned Katz (1995) gives an equally fascinating account of the “invention” of heterosexuality. Both of these writers are indebted to Michel Foucault. Rothman's (1978) *Women's Proper Place* illustrates how various waves of feminists have made arguments for similar changes in women's lives based on very different ideas about gender differences. In second-wave feminist psychology, Gilligan (1982), Miller (1976), and the work coming out of The Stone Center (Jordan & Surrey, 1986; Surrey, 1985), represent difference feminists, while Benjamin (1988, 1991), Chodorow (1978, 1989), Dimen (1986, 1991, 1992, 1995), Dinnerstein (1976), Goldner (1991), Harris (1991a, 1991b), and Shapiro (1993a) are more critical of these categories. In the first wave, Horney started as a difference feminist who saw men and women as essentially, biologically different, but equal. She subsequently deemphasized biological differences. The second wave of psychoanalytic

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feminism began with an appeal to biology in the empirical research of Masters and Johnson (1966) and John Money (Money & Ehrhardt, 1972; Money, Hampson & Hampson, Hampson 1951, 1955). Ethel Person's first articles, written with Lionel Ovesey, are based on this empirical research (Ovesey & Person, 1973, 1974 Person & Ovesey, 1974a, b). She then went on to a more psychological and less biologically based development of her ideas (1980, 1985; Person & Ovesey, 1983).

Discriminatory Practices in Admission to Medical Schools and Psychoanalytic Institutes

In 1977, Mary Roth Walsh wrote *Doctors Wanted: No Women Need Apply*. In the 1970s the rate of women in medical school began to change significantly, but the proportion of leadership roles occupied by women lagged far behind. In the 1980s women physicians and women psychiatrists began to organize and reflect on their history.

Within any given field, including psychoanalysis, there is a specific form of political feminist activism that seeks greater institutional representation and power for women. In addition, there has been theoretical work on women's development, psychology, sexuality, and recently, a more overarching critique of theories of gender.

In 1908, Horney was in the first class that allowed women in medical school in Berlin. Even though Elizabeth Blackwell had become the first woman doctor in America in 1849, the American Medical Association did not accept women as members until 1915 (Drachman, 1986, p. 10). For the most part, until 1925 female doctors studied and worked separately from men. This was in keeping with beliefs about sex differences in intellect and physical stamina. Only 20 to 30 percent of these women were married. In 1910 the number of women physicians in America peaked at 9015. Between 1910 and 1960 the number of women physicians stayed at the stable rate of 4 to 6 percent. For part of that time, married women physicians were discriminated against and not allowed on internships. Medicine was not the only career to discriminate against married women and women with children. In many communities public school teachers were fired if they got married or became pregnant. Women had to choose between a career, with its implicit condemnation to the life of a "spinster," or marriage and children, which often stripped a woman of financial and psychological independence—a precursor of the more contemporary idea of the "mommy track." Drachman (1986, p. 9)

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notes that balancing careers in medicine with marriage was a major challenge for women in the first quarter of the twentieth century. Some became medical missionaries, some left medicine when they married; overall, while women seemed more integrated into medicine than they had been before 1900, they expressed greater loneliness. It is noteworthy in this context to remember that Clara Thompson had to choose between a proposal of marriage and medical school when she graduated college. She chose medical school and began studies at Johns Hopkins in 1916, a year when more women were able to get into medical school because men were being drafted into service in World War I. Thompson never married. Moulton, a generation later, graduated medical school around the start of World War II with a cohort of female doctors that was more likely to experience divorce and less likely to consider sexual discrimination as a central fact of professional life, even though it still was. Jarvik (1986), writing about her experience training a decade later, describes how she rejected the women's movement and felt that feminism was alien to her. In fact, many of these women suffered in silence. The White Institute that I frequented in the 1970s had a significant group of older women analysts, trained in the 1940s, who possessed, at least in my transference eye, an aura of authority. But between the death of Clara Thompson in 1958 and Marylou Lionells's appointment as Director in 1988, it seemed that women's authority at the Institute had waned.

World War II and the Forced Emigration of European Analysts to America

The influx of these analysts had financial consequences in the United States, because it came at the height of the economic depression, and also affected professional training and theorizing. A high percentage of female psychoanalysts were emigrating from Europe. They had often been more politically active and philosophically educated than their American counterparts (see Jacoby, 1983). The immigration of this large and important group was also connected in time with Freud's death, and both occurred at a moment of worldwide and personal trauma. As far as I know, this coincidence in timing of the death of our "father" with the trauma of World War II has not been sufficiently explored (see Hale, 1995; Jacoby, 1983). I think Freud's death at a time of extreme social, cultural, financial, and psychological insecurity (secondary to emigration, death of loved ones, and so on) had to increase tendencies toward idealization and a general conservative attitude among his followers. It also

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may have contributed to the extreme factionalism that led to the splits in the New York psychoanalytic community, which in this context might be likened to the sibling warfare that often flares up at the death of a parent.

As Psychoanalysis was Americanized, It Developed into a Profession in this Country

There have been several important studies of the professionalization of psychoanalysis in the United States, including those by Fine (1990), Grob (1985), Hale (1995), Kirsner (2000), Quen and Carlson (1978), and Wallace and Pressley (1980). The structure of psychoanalytic training institutes and their development outside of academic and intellectual communities have been the themes of an emerging literature (Eisold, 1994, 1998, 1999, 2000; Hale, 1995; Kirsner, 2000). Aron (1996) describes the significance of the development of New York University's Postdoctoral Program in Psychotherapy and Psychoanalysis as part of a university. An important part of this theme is the split within the New York Psychoanalytic Institute and its resolution in New York in the founding of other institutes.

The Personalities of Early Women Analysts, Along with Their Interactions with One Another

Interactions—competition, envy, jealousy—are an important part of the story. Here one can turn to biographies of

Horney (**Quinn, 1987; Paris, 1994**), Fromm-Reichmann (**Hornstein, 2000**), Deutsch (**Roazen, 1985**), Anna Freud (**Young-Bruehl, 1988**), Klein (**Grosskurth, 1986**), Sabina Spielrein (Kerr, 1993), and Lou Andreas Salome (**Livingston, 1985; Martin, 1991; Peters, 1974**). In the interest of maintaining narrative flow, these books are not always cited each time I use them in the biographical part of what follows, though context should make it clear where any particular biographical detail comes from.

The Demographics of Patients

In choosing psychoanalytic treatment and specific psychoanalysts, as well as the choice of patients by different psychoanalysts, demographics have played a significant role. I also suggest the impact of patients' presenting problems on the development of clinical practice and theory.

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This outline clearly contains more than can be covered within the confines of an individual article, but I think that any effort at understanding the changing experiences and theorizing of female analysts in this country must at least attempt this level of complexity. Over the course of the last century feminist theory and political feminism repeatedly intersect with psychoanalytic practice and theory. Theories of similarity and difference between men and women, and beliefs about women's sexual desires and maternal "instinct," go in and out of fashion. As Kelman notes in his introduction to Horney's (1967) *Feminine Psychology*, "scientific and cultural theses, like human beings, have their rhythms. Their cycles and changing interests are reflected in the successive generations who contribute to them" (p. 8).

Over the course of the last century, male and female psychoanalysts and their prototypical patients have moved from the margins of society (bohemians and political radicals) to the mainstream (psychiatric administrators, "yuppies"). The links over the last century between feminism and psychoanalysis have been the focus of considerable scholarly work (**Buhle, 1998; Dimen, 1995, 2001; Phillipson, 1993**), all written by women. Rarely has the impact of feminism on psychoanalytic theory been acknowledged by male analysts (**Aron, 1996**). Crowley and Green (unpublished paper) note that unlike some analysts who consider "a mature man (sic) one who adjusts to his culture, Thompson defined the mature man as a 'person sufficiently anxiety-free to be able to deviate from the culture when he finds it necessary to maintain his integrity or when he is convinced that the aims of the culture are bad for man.'" These cultural influences are perhaps even more pervasive today. In the 1990s gay and lesbian psychoanalysts challenged heterosexist assumptions and drew on feminist understanding of gender to ground their critique of psychoanalysis (**Blechner, 1995, 1996, 1998; Corbett, 1996, 1997; Domenici and Lesser, 1995; Drescher, 1998**). As this new "other" confronted mainstream psychoanalysis, more male analysts, **Blechner (1995, 1996, 1998)** and **Hirsch (1993, 1997)** for example, began to challenge psychoanalytic assumptions about masculinity.

Psychoanalysis before 1935

Initially, psychoanalysis was seen as a sexually liberating acknowledgment of women's desires. This was appealing to the exceptional women who were the first of their gender to be admitted to universities, or

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allowed to attend medical school. We know from their biographies that these women were often sexually curious and experimental as well. Freud's belief that women might be better able to work with certain patients also contributed to the acceptance of large numbers of women in the first cohort of European psychoanalysts. Some of these women, such as Deutsch and Bonaparte, wrote about female psychology, others focused on work with children (Hug-Hellmuth, and later Klein and Anna Freud), or worked with psychotic patients (Fromm-Reichmann).

Also from its inception, psychoanalysis has been driven by the needs of female patients struggling to "survive sexual contradictions" (**Dimen, 1986**). Freud's first patients, suffering with hysterical symptoms, were often women raised in traditional families, straining to have sexual and intellectual lives of their own. Even Anna O, we now know, was Bertha Pappenheim, the founder of the field of social work. Freud's early female followers were women who had pushed their way into higher education, into the public sphere, and were often then in considerable conflict with their families of origin (**Appiganesi & Forrester, 1992**).

Some of the issues faced by early women analysts and by many female patients remained too shameful and misunderstood to be acknowledged and worked with in most analyses until quite recently. For example, **Hornstein (2000)** notes that Fromm-Reichmann, raped as a young medical student, was shamed by her mother and never subsequently discussed this experience. In all likelihood she was not the only analyst to suffer this experience. Freud's shift in emphasis from a concern with the trauma of sexual abuse and incest to a focus on the universality of oedipal fantasies led many psychoanalysts and psychiatrists to underestimate significantly the frequency of abuse and incest, and led many women patients and analysts to remain silent as well. It appears that one of those women who kept this kind of abuse secret was Clara Thompson (**Shapiro, 1993a**). For all the controversy surrounding Masson's *The Assault on Truth (1984)*, we owe him an enormous debt for reopening this topic, for calling Ferenczi's brilliant 1933 paper on "The Confusion of Tongues" to the attention of so many analysts otherwise unfamiliar with Ferenczi's work. Even in 1976, the standard textbook of psychiatry by Friedman and Kaplan claimed that the rate of father-daughter incest was one in a million. Anyone who saw this text as the "bible" would of course doubt the validity of a woman's

claims of sexual abuse.

Ferenczi, reversing Freud's earlier shift in position about the frequency of sexual abuse and incest, claimed that most of the patients he saw in

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his last years had been the object of sexual and physical abuse (Ferenczi, 1932). In his writing about sexual abuse, Ferenczi emphasizes the importance of distinguishing between real and fantasized events both in childhood and within the consulting room. His outspokenness about the dangers of mystifying our patients by denying the reality of their perceptions of the analyst grew out of his analytic work in the late 1920s and early 1930s with Elizabeth Severn, a patient who pushed Ferenczi to experiment with mutual analysis. She forced the topic of counter-transference analysis into the foreground (Ferenczi, 1932; Fortune, 1993), and as Wolstein (1992, 1997) noted, Severn, like Anna O, deserves credit for cocreating one of the main tenets of contemporary psychoanalytic practice. Interestingly, Clara Thompson, who introduced Ferenczi's work with countertransference, neglected to import his ideas on sexual abuse.

So as we see, women patients such as Anna O and Elizabeth Severn, as well as early women analysts, had experiences in their own personal analyses and in the treatments they conducted, which led some, such as Horney, to question classical interpretations. Other women, like Freud's patient Dora, clearly disagreed with his interpretations, but were not in a position to develop these disagreements into a coherent alternative theory. Horney was in analysis intermittently with Karl Abraham from 1910 to 1913 and then again in 1918 (Paris, 1994, p. 4). She later described her personal psychoanalytic experience with Abraham and a subsequent brief treatment with Hanns Sachs (also one of Fromm-Reichmann's analysts) as useless.²

While Horney's treatment with Abraham might not have been especially clinically useful, it seems to have been an incentive for writing her early papers on women. According to her biographer Susan Quinn (1987), Horney was the model for one of the patients Abraham described in his 1920 paper, "Manifestations of the Castration Complex in Women." Horney (1924) answered this paper with the first of her papers on women: "On the Genesis of the Castration Complex in Women." From

² After Horney's failed analysis with Sachs, she came to rely on self-analysis. We've come to recognize that it is almost impossible to resolve characterological issues in self-analysis, and some might argue that Horney's personality difficulties never got resolved and manifested in institute schisms and stormy romantic relationships. But the very qualities that caused these troubles may also have allowed her to leave an unsatisfying marriage, be one of the first analysts to emigrate to the United States, openly criticize Freudian theory, and go on to develop her own theory of psychopathology and treatment.

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this "timid step ... coming out in favor of women's biological equality" (Eckhardt, 1991, p. 236), Horney began her increasingly strong dissent from Freudian theory.

Initially she stayed within the biological model for understanding the differences between men and women. But Horney soon began to focus more on the social and cultural forces attendant on women's sense of inadequacy. Using the work of Georg Simmel she argued that all of civilization, culture, and science grew out of a male perspective. She suggested that "if we try to free our minds from this masculine mode of thought, nearly all the problems of feminine psychology take on a different appearance.... What about motherhood and the blissful consciousness of bearing a new life within oneself?" (1926, 1967). Anticipating Dinnerstein (1976) by fifty years, Horney asks whether men don't envy women's fecundity and whether that envy has been the basis for the dread of women and the need to disparage them.

Whether or not men envy women's fecundity, the pregnancy of the analyst became a significant prompt toward an expanded view of the psychoanalytic field of inquiry in general and transference in particular. Male and female patients' reactions to female analysts and to the obvious vicissitudes of their lives (e.g., pregnancy) were at odds with strict beliefs about the anonymity of the analyst. Some of the first papers acknowledging the influence of changes in the analyst's real life circumstances on the patient's transference addressed the impact of the analyst's pregnancy during the course of treatment (Gerson, 1996; Imber, 1990). Thus the early presence of significant numbers of women psychoanalysts led to the obvious question of the significance of gender differences in analyst and patient. It was Freud who first suggested that some early, preoedipal disturbances might be more readily addressed by women analysts. Once he noted that the gender of the analyst might have an impact on treatment, the door was open to an appreciation of the impact of a variety of "real" differences in the person of the analyst on the transference of the patient. As noted above, Ferenczi was one of the most outspoken early analysts to emphasize the impact of the analyst and countertransference on the treatment.

For a long time, and in many professions, being legitimate meant being the same as men. Muriel Dimen (personal communication) notes that anonymity is based on an idea of the generic analyst, like the generic human as male. It is in the course of looking at the other, in this case woman, that many taken-for-granted assumptions were brought to light.

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Thus, not surprisingly, first-generation women analysts, both Freudian (e.g., Deutsch, Bonaparte) and those critical of Freud (e.g., Horney), were reluctant to follow Ferenczi's line of thought—this pursuit of the impact of the “real” qualities of the analyst. Perhaps they, like the first women in any new role, were at pains to proclaim their legitimacy. Early women analysts, supervised by men and struggling with their own deviance from societal norms, were not likely to address the impact of gender differences within either the treatment or supervisory dyad.

First-generation women analysts, with differing family configurations, differing temperaments, social class, religion and ethnicity, varied in the degree to which their personal psychologies matched Freud's developing theories of women. They also varied in the degree to which they felt free to challenge his views and interpretations when their own experience differed from his theory.³ And, as I mentioned before, these women also differed in the degree to which they identified themselves as feminists, even though they all were leading lives that went against the norms of their culture and were made possible only as laws against women in the public sphere were changing. It has become commonplace, post-September 11, 2001, to express shock and horror at the treatment of women by the Taliban—their lack of access to education or the freedom to earn a living. We should remember that in our own history women were denied the right to higher education until the end of the nineteenth century, and it is only in the last thirty years that they have had access to many jobs and professions.

Rothman (1978) and Rowbotham (1997), historians of women in the last century, have noted the changing meaning and social valence of the label “feminist.” Their work helps us understand why many women through most of the twentieth century have been reluctant to describe themselves as feminists. During different decades in that century, the term was considered derogatory, a way of saying a person was “unwomanly.” Freud and others seemed to think that if a woman challenged her role in society or challenged her unequal treatment by society, then she wanted to be a man, and these complaints were just a cover for that more basic wish. In our own time we have seen feminism become a dirty word again (Dimen, 2001).

³ An area worthy of further study is the impact of patients' or students' class, religious, and ethnic background on their ability to challenge the authority of the analyst or standard theory.

Horney and Thompson: The First Psychoanalytic Feminist Theorists

Karen Horney (1885-1952) and later Clara Thompson (1893-1958) disputed Freud's derogatory claims about feminists and insisted on the significance of social and cultural inequities on women's development and psychological experience. Horney's initial critique, as noted above, began timidly, with a basic agreement with Freud's emphasis on biological and physiological bases of experience. But there was a significant difference: Horney valorized primary feminine sensations and experiences like childbirth. In a bolder move, she noted the degree to which Freud's views reflected the beliefs of boys in his culture.

Horney's differences with Freud grew as she focused increasingly on the cultural and social experience of women. By the late 1930s, after she had moved to America, Horney further developed her thinking, becoming less of a “difference” feminist and extending her views into a new, holistic theory of human psychology. In this later work, Horney, like Freud, evolved a grand, overarching theory. Her work on women's psychology had been a jumping-off point and an important step in her own self-analysis, but her subsequent work became a cornerstone of what became known as the cultural school of psychoanalysis.

Unlike Adler, Rank, and Jung, who were forced out of mainstream psychoanalysis early in the development of their ideas, Horney continued to teach and supervise at Freudian institutes until 1941. She had come to the United States in 1932 and was the associate director of the newly formed Chicago Psychoanalytic Institute. But in Chicago she was subordinate to Franz Alexander, a man six years her junior and a former student. Horney left Chicago after two years, but while there gave her first papers in English and struggled with the differences in culture, with being a refugee.

Quinn (1987, p. 260) describes how Horney was shocked to be called by her first name, and how American women commented on Horney's different sense of style and the difference in her posture, manner of walking, ways of holding a cigarette. In her papers from this period, “Maternal Conflicts” (1934) and “The Overvaluation of Love” (1935), Horney explores women's sexual desires, preoccupations with “having” a man, and some women's need to “prove their feminine potency to themselves.” Quinn notes that there is considerable autobiographical material in these articles.

While in Chicago, Horney met Harry Stack Sullivan, Margaret Mead,

and Erich Fromm. Horney's personal independence and theoretical differences with traditional psychoanalysis were becoming more obvious and led to the first of her many breaks with psychoanalytic homes.⁴ In 1934, Horney, increasingly allied with Sullivan and Fromm, and becoming romantically involved with Fromm as well, moved to New York. Her initial experiences at the New York Psychoanalytic Institute are emblematic of the conflict between European analysts, with their greater seniority, and the Americans, who were zealously guarding their own turf. The battles she encountered over whether or not to demand that senior analysts from other institutions satisfy committee

requirements for approval as training and supervising analysts have been fought repeatedly and continue to this day (Kirsner, 2000).

Horney was allowed to join the faculty of the New York Psychoanalytic Institute where she soon gained a reputation as a good lecturer. But her popularity did not endear her to her peers. At the same time, Horney began teaching at the New School for Social Research, where she was exposed to a rich mixture of émigré intellectuals. The lively atmosphere of intellectual debate among social scientists at the New School was in sharp contrast to the formality of New York Psychoanalytic. While in New York, Horney joined Sullivan, Thompson, Erich Fromm, and William Silverberg in the Zodiac club—a combination peer supervision group and study group. Clara Thompson had recently returned from Budapest, where she had moved to be in treatment with Ferenczi. Sullivan, who Thompson had met in 1923, wanted one of them to have a traditional psychoanalytic experience and preferred that it be Thompson. He thought only Ferenczi would do, and this proved to be an inspired choice. Ferenczi's interest in countertransference and his focus on the impact of external events and relationships (as opposed to unconscious fantasy) were profoundly in tune with Sullivan's ideas, and through Thompson it came to have enormous influence on interpersonal psychoanalysis.

These were exciting intellectual times. Horney had her experiences at the Berlin Institute and later in Chicago, where she was exposed to Margaret Mead's thinking. Sullivan looked simultaneously to the tradition of

⁴ Quinn cites Dorothy Blitzsten's idea that among Horney's criticisms of Alexander was the fact that he gave “too much of an inside role to wealthy lay people” (p. 274). This becomes then one more reason for her distrust of non-M.D.'s. Hanns Sachs had been a lay analyst, as was Erich Fromm. Both Horney and Fromm-Reichmann were sharply critical of the semireligious awe with which Freud was held by Abraham, Sachs, and those in the Berlin Institute.

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American psychiatry, the Chicago school of sociology, and the linguistic work of Sapir. He had a commitment to operationalism, and a deep familiarity with and interest in severe pathology. Thompson was not only a very good friend of Sullivan, a fellow American, but also was steeped in the work of Sandor Ferenczi. And Silverberg, an old friend of Sullivan, was more comfortable in mainstream psychoanalysis. When Fromm joined their circle he brought Marxist social criticism, as developed by the Frankfurt school, to this heady mix.

Although the writings on women by Thompson and Horney are often mentioned in the same breath, it is important to remember that Horney's initial writings preceded Thompson's by more than fifteen years. It is significant that Thompson, a native New Englander, had a very different personal history and personal style than Horney, even though their early papers on women have much in common. Their association in the minds of classical analysts is probably strengthened by the fact that in 1941, they left the New York Psychoanalytic Institute together when Horney was demoted.

Both Thompson and Horney came from scaparing, religious Christian families, but Thompson, an American, was estranged from her mother for much of her adulthood, while Horney was more critical of her own father and was encouraged in her early ambitions by her mother. Thompson's earliest effort to justify her desire for a professional career was to strive to be a medical missionary, a plan she had while in college, but she was then forced by her first significant boyfriend to choose between marriage and medical school. She chose medical school, and never married. She did have a long relationship with Henry Major, a Hungarian painter who was already married and never left his wife. I think that Thompson's experience in this relationship, as well as her experiences with her patients, led her to be quite “modern” in her ideas about the need to consider and approve alternative living and romantic arrangements for women and men.

When Horney and Thompson met, Horney was divorced, the mother of three grown daughters, and was soon to be romantically involved with Fromm. It seems that Horney, from an early age, had a varied romantic life, while Thompson was somewhat slower to have romantic and sexual relationships. Both Thompson and Horney were highly ambitious, and both founded and directed their own psychoanalytic institutes. Their stylistic differences, the consequence of both the cultural differences of the countries of their birth and their differing experiences of themselves as

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women, must have contributed to some of the institutional tensions that were to follow. Horney seems to have been a “born leader” who required a following, but also frequently alienated people. Thompson, on the other hand, seems to have directed the White Institute because someone needed to do the job. She doesn't seem to have been as charismatic, but she also seems to have been less divisive and more capable of creating consensus. Thompson, unlike Horney, did not aspire to the grand project of creating a new psychology. But she did write a series of very influential articles focused on clinical practice and the problems of transference and countertransference. It was in the development of a more interactive, process-oriented mode of conducting treatment that she would have a greater influence.

An issue that I can only begin to address here is the impact of individual psychological differences among analysts on the development and history of psychoanalysis in general and feminist psychoanalysis in particular. As I asserted in a previous article (Shapiro, 1993b) we inhabit gender differently—we are variously saturated with gender

identities, and individual women define their femaleness differently and see themselves as more or less successful in their femaleness. Thus, among any prominent women analysts there will be significant differences in the “types” of women represented. Women vary in how attractive they are to men, and how attracted they are to them; how fashion-conscious they are; how materialistic, nurturant, sexy, “cultured,” ambitious; how friendly they are to other women, and so on. They differ as well in the degree to which one or the other parent encouraged their ambitions. Both Horney and Fromm-Reichmann were encouraged by their mothers, who fought alongside their daughters when the young women battled their fathers' desire to keep them at home. This is a very different beginning than someone like Thompson who, from an early age, did not find her mother helpful in forging a new life and was deeply estranged from her mother for many years.

Women also differ in the demographics of marriage, divorce, children, religion, class. I would suggest that these differences contributed greatly to the depth of the break between the followers of Horney and Thompson, and to the various emphases in the two women's writing. Some of Horney's papers on women (e.g., **Horney, 1935**) grow out of her sexualized way of relating. Horney appears to have been more materialistic than Thompson, but also more “European” and “cultured.” Mead (cited

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by Quinn) notes that Horney's style changed dramatically from her time in Chicago, when she “never paid any attention to her appearance and I remember people saying that she looked like a typical Viennese intellectual.” “Later in New York,” Quinn notes, “she used to dress very elegantly and rather ostentatiously” (Quinn, **1987**, p. 307). European analysts shared a similar cultural background as well as the experience of dislocation and emigration. Thus there was a familiarity shared by women like Alberta Szalita and Frieda Fromm-Reichman that they did not have with the American-born Thompson. Add to this the significant difference in their family constellations to which I have already referred: both Fromm-Reichmann and Horney were supported in their strivings by their mothers, while Thompson was not.

Horney developed a clear, jargon-free style of writing, much more accessible to the general population than the writings of most of her male colleagues. In her writings, a central theme is often addressed with several short clinical anecdotes, in a form that resembles an empirical study. These are not the long, single-case reports of Freud, nor are they abstract theoretical essays. This was a new, more descriptive and observational style of psychoanalytic writing. It is also found in Thompson's essays and is continued in Moulton's writing. Often this more accessible prose style led critics to question the depth of ideas expressed in these works.

Horney wrote about both her own conflicts and those of the women she was treating (as Thompson, Moulton, and Symonds did later). Both Horney and Thompson often gave talks and wrote papers that were addressed to a general audience of intelligent women. Both spoke to groups of women in other professions. Initially, after Horney and Thompson left the New York Psychoanalytic Institute and before the institutes they created had their own journals, their papers appeared in journals with a more varied audience (e.g., *The American Journal of Psychotherapy*, *American Sociological Review*, *The American Journal of Sociology*, *The American Journal of Obstetrics and Gynecology*, *Consumer Reports*, *Cosmopolitan*, *The Family Newsletter*, *The Journal of the American Association of Psychiatric Social Workers*, *The Journal of Adult Education*, *The Journal of Psychiatric Social Work*, *The Journal of Social Issues*, *Pastoral Psychology*, *Samiksa*). The easily accessible writing styles of Horney and Thompson, and their interest in problems facing contemporary women and modern marriages, led to the frequent citation of their work in women's magazines. This began a tradition that Moulton and

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Symonds continued; in fact, women's psychological advice columns have become mainstays of most women's magazines as women continue to struggle with changing and conflicting roles.

The Psychoanalytic War of 1941

The split from the New York Psychoanalytic Institute by Horney and her colleagues had serious repercussions for the development of psychoanalysis in this country. It is remarkable that during the same years that World War II was beginning in Europe, New York psychoanalysts were drawing their own parochial battle lines. Quinn (**1987**) and Paris (**1994**) devote considerable space to describing events leading up to the 1941 split, and my summary draws heavily from their research. The battle began in 1939, when the students of New York Psychoanalytic requested greater diversity in the curriculum, including the inclusion of a course on more severe disturbances, perhaps to be taught by Sullivan; a lecture course by Horney; and case seminars taught from different points of view. Instead of agreeing to these requests, Lawrence Kubie, president of the New York Psychoanalytic Society and Institute, responded by proposing a curriculum that was even more conservative than before, with no courses by Horney or Sullivan, while Thompson was assigned the course on Freud's early writings. The students protested that the required courses “are almost entirely presented from the classical point of view. These students feel that such an attitude is not progressive nor scientific when considered in the light of other branches of medicine where divergent attitudes are encouraged and stimulated” (Quinn, **1987**, p. 331). Horney thought “that a democratic organization should balance one group against another, and felt that the decision lay between a rigid teaching institution or a progressive one” (p. 331). Horney wrote David Levy, a child psychiatrist who was also distressed with the current situation, “It is more and more amazing to see with what supreme disregard facts are treated in psychoanalysis” (p. 332).

The battle between Kubie and Horney raged for more than a year, becoming, as psychoanalytic disputes often do, ever more personal. In September 1940, Brill exhorted “everyone to follow Freud and avoid other temptations” (p. 340). Students began to complain of intimidation. Increasingly, Horney and Thompson were seen as troublemakers who were “poisoning” the students. In April 1941, at a society meeting, a vote was taken and Horney was demoted from instructor to lecturer. At this

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point, Horney got up to leave and was joined by Thompson, Harmon Ephron, Bernard Robbins, and Sara Kelman. They formed a new institute, the Association for the Advancement of Psychoanalysis, with Horney as dean. Originally this institute was supposed to be more democratic, less rigid, and more inclusive, but its charter described its mission to be the training of “full-fledged physicians.”

Horney's charisma at this time is attested to by the fact that both Walter Bonime and Ruth Moulton, candidates at the institute, named their daughters “Karen.” Thompson, Fromm, and Sullivan taught at the new institute and were joined by William Silverberg. True to the original intent, the speakers invited that first year included Margaret Mead, Franz Alexander, Abraham Kardiner, and Frieda Fromm-Reichman. The student population of the new institute grew rapidly, and it all looked quite promising. The founding of this institute coincided with the bombing of Pearl Harbor, and this fit well with the group's cultural interests. Clinical attention was paid to the effects of war on personality. Horney's (1942) writing on the subject of panic gained considerable attention from the general public. Erich Fromm's *Escape from Freedom* came out that year as well.

As with many revolutionary movements, this institute soon fell into conservative turf battles. We can't know precisely how much Horney's decision to ban lay analysts from teaching and supervisory positions was a function of a failed romance with Fromm, bad experiences with her own lay analyst (Hanns Sachs), a contest with Fromm for popularity among the students and general reading public, distress at the impact Fromm was having as the analyst of her daughter Marianne Eckhardt, or simply the very American desire to use medical affiliation as a means for establishing respectability. We do know that by 1943, there was another institutional split. This time Fromm, Thompson, Sullivan, and their students, including Ruth Moulton and Marianne Eckhardt, left and affiliated with the Washington School of Psychiatry and its faculty, which included Fromm-Reichmann.

The circumstances of this split have received far less attention than the 1941 split. In a few years there was yet another split, this time between the New York College of Medicine, with which Horney's group was originally connected, and the rest of Horney's institute. It is as though the institute wasn't big enough to contain the ambitions of its members. I question whether the stylistic differences, insecurities, and jealousies between Horney and Thompson were more significant in this split than is

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immediately apparent. As evidence of this, other than references to her work on women, Horney and those affiliated with her were almost never cited, and were rarely assigned, by faculty at the White Institute. Likewise, for many years the work of subsequent analysts at White did not make it into the courses at Horney's institute. The impact of jealousy, envy, and distrust between women of the same generation, and between professional “mothers” and “daughters” on the slow progress of women in the professions, has been generally obscured as we focus on the more immediately apparent effect of male sexism.⁵ For many years, women at psychoanalytic institutes, like women in the culture at large, suffered silently, fearing that their experiences were unique. It was the advent of CR (consciousness raising) groups in the second wave of feminism that led women to feel safe enough to reveal their experiences and discover they were not alone. In the 1980s, women physicians followed suit. The book that Moulton gave me, *Women Physicians in Leadership Roles* (1986), grew out of just this movement.

Regression: 1950-1966

Horney's and Thompson's theorizing about women took a back seat to the psychoanalytic politics they were deeply embroiled in as they developed their own ideas. Although these breaks, first in 1941 from New York Psychoanalytic, and then the break from Horney by Thompson, Sullivan, and Fromm in 1943, have been well documented (Hale, 1995; Kirsner, 2000; Paris, 1994; Perry, 1982; Quen & Carlson, 1978; Quinn, 1987), I think they need to be revisited and contextualized in order for us to understand how women's progress in psychoanalytic institutes, and in America generally, got derailed. As Margaret Mead noted in 1976, “we women are doing pretty well. We're about back to where we were in the 20s” (Bernikow 1997, p. 141).⁶ Several factors mentioned at the start

⁵ Moulton (1985a) addresses this in her article on mothers and daughters. Starting in 1987, Muriel Dimen and I focussed on this issue in a presentation we offered many times over a number of years entitled “Trouble Between Women.” More recently this has been the focus of several exchanges at Division 39 meetings, where my generation has been horrified to experience a form of matricide as our work remains uncited by the next generation of women.

⁶ Women made up more than 30 percent of refugee psychoanalysts coming to America (Chodorow, 1986; Jacoby, 1983). As Jacoby notes, “This is an exceedingly high proportion, not since maintained: in 1958 ... women accounted for only 9 percent of all students in psychoanalytic institutes” (p. 149). Since the 1980s the trend has been toward increasingly large percentages of

women analysts, to the point that Phillipson (1993) speaks of the feminization of psychoanalysis.

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of this essay are implicated in these psychoanalytic wars.⁷ Most powerful was the effort to control supply and demand of psychoanalysts, and to create and maintain an image of authority and expertise. Also significant were the major economic depression of the 1930s, followed by World War II and the consequent flood into the United States of European analysts, who were personally touched or anointed by Freud.

An area that has been little explored, and feels taboo even to mention, is the relationship between Jewish and Christian psychoanalysts, especially at a time when anti-Semitism was rife in this country. Hale (1995) describes how, increasingly, “psychoanalytic recruits from well-to-do families educated at the best medical schools ... looked down on Eastern European Jews as did Freud” (p. 103). Kirsner (2000) notes the deep ambivalence American analysts had for the European immigrants (pp. 19, 70). Quinn (1987, p. 79) notes the widespread anti-Semitism in families like Horney's, and how, as a young woman, this distressed Horney. In later years, Horney herself was suspected of anti-Semitism because of the successful film career her daughter Brigitte had in Nazi Germany. On the other hand, another of Horney's daughters, Renate, describes how her arm became paralyzed when she was supposed to offer a Nazi salute.

In some early unpublished notes of Thompson (White Institute Archives) I could sense her struggling with her discomfort at suddenly having many more Jewish friends and acquaintances. I don't mean to single out Thompson. I'm sure she was not alone, but because I think the historical record has often been sanitized, and personality and stylistic differences between people have been attributed to the difference between European and American cultures, I think it important to include a dream of Thompson's that I discovered, along with several others she had in the late 1920s, in this archive. It is probably emblematic of many Americans' experiences. This one, dated January 23, 1928, stopped me in my tracks: “Standing by swimming pool. Girl swimming—I said those people do make me sick. They are snobs. I hate Jews anyhow. In grocery store—place much larger than in reality. Questioned about a little girl. Youngster with high heeled fancy shoes. Took off shoes and stockings and showed her my feet. I had hurt one with high heels.”

Perhaps the most blatant example of anti-Semitism among American

⁷ While researching this piece it was shocking for me to realize for the first time that, these two splits occurred during World War II. What are we to make of the fact that these wars were occurring simultaneously? Is it like heirs fighting over the legacy of their parents? A displacement of helplessness from the global situation into the smaller professional arena?

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psychoanalysts is seen through the letters of Ives Hendrick, an upper-middle-class New Englander. Referring to Jewish psychoanalysts, he wrote that he feared having his “status confused with that of these enthusiasts, fanatics, and mercenary charlatans, who have neither the scientific attitude nor the practical experience to qualify them for the work” (Hale, 1995, p. 110). Hendrick was shocked to find that some of the people he liked in Europe were Jews, at which point he writes that he felt he “was being stifled by a noxious, alien, all-pervading vapor” (p. 112). Hendrick's father had written a book about New York's Jews and the danger of Jewish socialism. In 1931, Hendrick noted that the “development of psychoanalysis was being crippled not only by conflicts of the young and the trained versus the older eclectics but by further divisions of ‘Jew against gentile, American against European, older against younger generations, city against city’” (p. 115). The economic depression had also taken its toll on American analysts, and increasingly the attitude was that if there were jobs for anyone, they should be for Americans.

The impact of the medicalization of psychoanalysis in the United States cannot be overemphasized. As is well known, Freud, though attempting to legitimize psychoanalysis as a science, did not focus in later years on its value as a treatment, but rather as a research tool. It was therefore not inconsistent that he felt it unnecessary for psychoanalysts to have medical training. Perhaps the increasing restrictions on Jews entering medical school contributed to Freud's openness. But his views did not prevail in the United States for several reasons. There was a prior history here of medicine co-opting nonmedical domains (Rothman, 1978). The social-reform movement of the first decades of the twentieth century focused on the health and welfare of immigrant mothers and children. This movement led to a series of programs and laws that brought this task, previously considered part of the field of education, into the medical arena. Similarly, the birth-control movement led by Margaret Sanger, when finally successful in disseminating birth-control information, was taken over by medicine (Chessler, 1992). As medical doctors governed more areas of life, they acquired more power and were better remunerated. It was consistent with this trend that psychoanalysts in the United States sought to ensure respectability and financial success by linking psychoanalytic training with medicine.

In addition, as psychoanalytic training became institutionalized, the course of study became increasingly arduous and costly, which increased the desire of analysts to make this investment pay off. American psychoanalysts

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were also at pains to ensure their credibility, despite the fact that their link to Freud was often less direct than that of

their European colleagues. The influx of large numbers of European analysts from 1933 to 1940, including a large percentage of women analysts, threatened the financial well-being of American practitioners already hurting from the crash of 1929. The move to limit the practice of psychoanalysis to medical doctors significantly shaped the population of psychoanalysts. The efforts at restricting the practice of psychoanalysis to M.D.'s may have had economic advantages by limiting the number of practicing analysts, but it had unintended consequences in retarding the growth of feminist psychoanalysis.

The percentage of women medical students declined from a high in 1910 to a mere 4 to 6 percent in the subsequent fifty years (**Drachman, 1986; Jarvik, 1986; Rothman, 1978**). Quotas governed admission to medical schools for Jews and for women, and success in medical school selected for certain cognitive and character styles. The radical bohemian types that were drawn to psychoanalysis in its early days were not likely to get into medical schools and complete medical training in the United States. In addition, medical training in America was becoming increasingly focused on training, not education.

European analysts, steeped in the earlier humanistic bent of the discipline, faced several hurdles when they immigrated to this country. Those without medical training were out of luck, and they risked being arrested for practicing medicine without a license. Those who had been medically trained needed recertification in order to practice. States varied in the stringency of requirements for recertification, and this led to a preponderance of analysts in New York (**Kirsner, 2000; Jacoby, 1983; Hale, 1995**). Although many émigrés wanted to be in New York because of the relative sophistication, it was also easier to get a medical license in New York. Only a passing grade was required on the qualifying examination. In twenty-one states at the time it was impossible for a foreigner to get a license, and in others, citizenship, or a year of internship, or both were required (Hale, 1995, p. 127). Jacoby (1983) suggests that it was this requirement for an internship that killed Fenichel, who had a fatal heart attack shortly after beginning his internship in California. European analysts were warned by Brill in 1933 that the county medical society in New York was investigating psychoanalytic practice by non-M.D.'s. In 1938, the American Psychoanalytic Association set up rules requiring a completed psychiatric residency prior to receiving analytic training. In

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New York, a lay analyst was prosecuted for practicing analysis without a medical license.

European analysts were vulnerable. They had just been displaced, and they were practicing in a foreign language, in a foreign culture, and at the mercy of the American analysts. This vulnerability, combined with the distrust of foreigners during and after the war, led to the suppression of their more expansive political and social concerns. The Europeans, often more senior and better trained than their American colleagues, were dependent on their American hosts for their survival. It seems reasonable to suspect that the increased emphasis in psychoanalytic theory on the ego and adaptation reflected the anxieties of the displaced Europeans.

Even within the interpersonal school, the fight over the legitimacy of non-M.D. analysts extracted a considerable toll. Horney, perhaps motivated by competition with and anger at Erich Fromm, banned non-M.D.'s from her institute. In those years there was considerable feeling at the White Institute as well that only M.D.'s should be trained. Part of the reason for this was the desire of some members of the White Institute to become part of the American Psychoanalytic Association, which had banned non M.D.'s from membership since 1938. Thompson withstood the pressure from these colleagues. But the very existence of this pressure prompted some psychologists to hedge their bets by initiating action to start a psychoanalytic institute at New York University. Meanwhile, the White Institute compromised for many years by limiting the percentage of psychologists admitted each year, and awarding them a different certificate.

A second conservative force in psychoanalysis resulted from the untimely coincidence of the death of its founder and the trauma of war. In no other field of medicine, science, or even the humanities has there been as strong a need to maintain allegiance to the principles enunciated by its founder. It is for this reason that psychoanalysis has at times been accused of being an ideology or a religion. I think this reactionary quality can be understood not only in light of Freud's own tendency to eject critics and independent thinkers, but also as a pathological grief reaction, strengthened by the loss of a homeland and a way of life.

Likewise, the structure of psychoanalytic institutes, with enormous power resting in the hands of the elders, constricted the thinking of candidates and contributed to their "straightening." Quirkiness was selected out, both in the choice of analytic candidates and, once admitted, in their

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behavior, at least if they wanted to graduate and further their careers (**Kirsner, 2000; Jacoby, 1983**). This had particular consequences for the future of feminist analysts, because in these intervening decades, traditional womanhood was once again glorified. Professional women were by definition somewhat suspect, and even within the schools founded by Thompson and Horney, perhaps especially there, women were at pains to fit in. The deaths of Thompson and Horney were followed by a relative reduction in the numbers of women in leadership positions. After Rose Spiegel cofounded *Contemporary Psychoanalysis*, there were no women editors of major psychoanalytic journals, and it would be many years before a woman once again directed an institute.

Post-World-War-II America, anxious in the shadow of the Cold War, sought to turn back the clock to a mythic period of domesticity and brought us the conformist fifties, enforced by McCarthyism and the widespread desire of

defeated, depressed immigrants to adapt to their new country. The sign of financial success and middle-class rectitude was the stay-at-home wife devoted to her children. The double standard of sexual behavior was strengthened as the nation attempted to go back to peacetime. Women were pushed back to the home, and the proportion of women in college and medical schools declined significantly (Rothman, 1978; Drachman, 1986). Before a new wave of feminist theorizing could occur, there needed to be a resurgence of political feminist activism. In these intervening decades, psychoanalysis in America had shifted from its earlier position as part of a radical social critique to a practice that was increasingly seen as supporting the status quo.

The 1960s and 1970s

Female analysts in the 1950s and 1960s kept a low profile on the subject of women. But this changed with the publication in 1966 of the research of Masters and Johnson and then of Mary Jane Sherfey. Their work on female sexuality allowed for a fresh round of feminist psychoanalytic thinking. If the first round could be seen as Horney, and later Thompson, asserting the significance of social inequality and subjugation for female psychology, this second round was initiated by empirical evidence contradicting Freud's theory of female sexuality and orgasm. Sherfey (1966) took Masters and Johnson several steps further by including new embryological findings of female primacy and the greater sexual responsiveness and orgasmic capacity of women. Just as in the previous

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generation, when Horney's earliest criticisms of psychoanalytic theory focused on ignored elements of women's biology, so too, this second wave drew power from the new physiological research on women's sexuality. All those women who had been trying to achieve mature sexuality by learning to have vaginal orgasms were suddenly being told: forget about it, don't worry—all orgasms are the same, you can't outgrow your clitoris.

Americans had always found empirical research compelling, and here was research proving that Freud didn't get everything right. If he was wrong on this score, maybe more criticism was in order. Maybe all those women, including women analysts, had one less thing to be ashamed of and could begin to speak their minds more freely and to feel comfortable in their bodies. Moulton's first publications address this new understanding of women's sexuality.

Moulton's articles in the 1960s and early 1970s expand on this reevaluation of women's sexuality. As she embarks on this journey, she is prompted, like many of her contemporaries, to review the history of psychoanalytic theorizing about women.⁸ Extraanalytic writing was having an impact as well. The publication in 1963 of Betty Friedan's *The Feminine Mystique*, and the invigoration of theoretical feminism by the publication of de Beauvoir's *The Second Sex* (French in 1949, English in 1953), were integrated into the life and thought of a generation of psychoanalytic patients and female analysts. It would take several decades for most male analysts and the institutional structures they headed to catch up.

Female analysts in the 1970s began to respond to the rapidly changing society in which they and their patients were living. At this time there was not only a smaller percentage of female analysts than there had been in Europe before World War II, but those that *did* have active careers were often not high in the political structure of institutes and were not well published. Perhaps there was a backlash to the power of Horney and Thompson, so that after their deaths men now ran the institutes they had headed. As cultural mores shifted and middle-class professionals hired fewer people to help in the home, the disproportionate burden of childrearing and housework fell on women. This, and the financial consequences of divorce, often kept women analysts in the "home" or

⁸ A spate of articles and books in the 1970s and early 1980s reviewed the psychoanalytic literature on women. Some are collections of historical papers (Miller, 1973; Strous, 1974; Alpert, 1986; Bernay & Cantor, 1986). Others are critical explorations of psychoanalytic theorizing and treatment of women (Chessler, 1972; Mitchell, 1974).

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the consulting room, with less time, perhaps less confidence, for writing and less opportunity for teaching. Most women who had children could not spend time writing until their children were grown.

Moulton was approaching fifty when she began to publish her work. By this time she was treating increasing numbers of women in crisis over the contradictory role expectations that surfaced in the early 1970s. Her papers from this decade read like a cultural chronicle of changing times. She addresses the impact of women's liberation, feminism, double lives, conflicts between motherhood and career, and the intergenerational conflicts between mothers and daughters who have grown up with dramatically different sex-role expectations.

The writings of Moulton and Alexandra Symonds are filled with clinical examples and descriptions of women's conflicts, but they seem reluctant to generalize or deduce theoretical principles to explain the problems they are confronting. As they noted the slow, conflicted progress of women who espoused one set of values, but seemed unconsciously to get in their own way and "contradict" themselves, Moulton and Symonds seemed to lack the theoretical language to make sense of what they were treating.

In the wider psychoanalytic community, empirical findings from other, nonsexual areas of research—infancy, biology, cognitive psychology—were increasingly forced into our awareness. Beliefs about the pathogenic impact of mothers, such as Fromm-Reichmann's idea of the schizo-phrenogenic mother, were challenged as biological

determinants of severe mental illness were found. Many previous assumptions about maturity and health were superseded by research findings that focused, not only on gender-based differences in responses, but also, and increasingly as more women conducted research, on the kinds of questions being asked and observations being attended to by researchers.

The 1980s and Beyond

In the 1980s this generation of interpersonal women analysts from both Horney and White Institutes overcame the historic divide between the two institutes and formed a study group to discuss literature on women. This group included Alexandra Symonds, Rose Spiegel, Marianne Eckardt, Anne Turkel, Rosa Lenz, and Esther Greenbaum. Symonds (1986) writes, “we discovered that the Academy was planning a panel in its next meeting on ‘The effects of feminism on campus’ and there were

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no women academy members consulted or selected to speak” (p. 173). This event galvanized the group, and several years later the Academy responded and formed a committee on women. The committee included Ruth Moulton, Rose Spiegel, Anne Turkel, and Esther Haar, as well as Alexandra Symonds who chaired it. In 1981, Symonds founded the American Association of Women Psychiatrists. Symonds (1986) writes movingly of the impact on its members of a peer group of women analysts—of suddenly realizing how much sexism they had been exposed to. She recommends this form of CR group experience to everyone.

But already the innovations in psychoanalytic theory arising from second-stage feminism were hatching, and they were coming from a different tradition. The only theoretical voice from the cultural school to focus on a new theory of women was Jean Baker Miller, a graduate of New York College of Medicine, who in the 1980s founded the Stone Center and a school of relational therapy that is not psychoanalytic. Out of this group of difference feminists comes the work of Carol Gilligan, Jan Surrey, Judith Jordan, Irene Stiver, and Nancy Goldberger.

Just as Gilligan was showing that women's moral judgments are different from men's, but not inferior, many women analysts were seeking support for “rules of therapeutic engagement” that were more related, perhaps more nurturant, or empathic, and more alert to attachment needs and separation fears than the mode of treatment they had been taught. By the 1970s and 1980s the cutting edge in interpersonal theory was best enunciated by Wolstein and Levenson. Wolstein's focus on the self and Levenson's focus on immediate engagement both implicitly grew out of, and were more easily followed by, a self-sufficient, field-independent personality. In my opinion, this is in part a very positive move toward a less theory-driven, intellectually defensive manner in the consulting room. Although Levenson acknowledges that inevitably the analyst becomes enmeshed in the “field,” there is an expectation that good analysts allow for the inevitable enactments, but can then “rise” above them and work their way out of this emotional thicket.⁹ Their innovations,

⁹ But inevitably we are unconscious of some of our personal contradictions and our own gender-based biases. This is illustrated by an experience I had in supervision with a man I greatly admired. Early on in the supervision I asked if he would read a draft of a paper I was working on. In retrospect I'm relieved that he didn't see my primitive early efforts, but at the time I wanted his help and approval. Perhaps he sensed that this wouldn't be forthcoming and spared me a potentially embarrassing incident. But he stated it as a general rule that he didn't understand why anyone asked others to read their papers—they should just get them out and then face the consequences in the responses that would follow. I remember thinking I'll never be able to be that courageous and independent, what a whoos I am to want preapproval. A few years later, I was consulting this same supervisor about a difficult case and he asked me for my opinion of a joke he wanted to include in his formal discussion later that week of a paper by a visiting analyst. He said that he really liked the joke, but that when he had shown it to his wife, she had thought he should exclude it. I don't remember the joke, whether I had an opinion, expressed it or not. But this incident, like the one that follows with Wolstein, illustrates the unexamined assumptions of autonomy—what Jean Baker Miller described so cleverly as the image of John Wayne or Gary Cooper, lone cowboys, whose support staffs or wives were never visible. This mythic sense of strength is not limited to men; it is obvious, for example, in the glorious description Heilbrun gives of George Sand's productiveness, which made me feel so small until my friend reminded me that Sand always had servants.

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focused as they were on individual analyst-patient dyads and specific interactions, were antithetical to the kind of generalizations made in any statement about gender. Their work tended to be either antiregression and suspicious of “empathy” or aggressively field-independent and focused on autonomy.¹⁰ Many women analysts were drawn to the work of Kohut or English object relations as a way to justify a more empathic, field-dependent stance.

One of the ways feminism *did* blend with the attention to detail in the analytic dyad that flourished at the White Institute was in the encouragement of women to take their own experiences seriously enough so that they could begin to challenge prevailing views. In second-wave feminism, a primary way this was done was through consciousness-raising groups. These groups encouraged women to share their experiences with one another, essentially becoming each others' mentors and teachers. Until the late 1960s and early 1970s many women felt isolated in both their personal and professional experiences. To the extent they felt they had to “pass,” they felt ashamed by any experiences that ran counter to the norm, and so tended not to discuss these issues with either men or women. Professional women during the middle decades of the twentieth century often experienced years of training in which

each was one of only a few women, frequently challenged and harrassed by predominantly male professors and managers, with few if any female colleagues. In this situation many women felt ashamed of their experiences, believing them to be unique to them rather than being general to women.

¹⁰ Once while I was in analysis with Wolstein, I reported on an incident in Jean Baker Miller's study group that had been reported to me by Jan Surrey. During their meeting at Jean's house, her husband came in and complained that "it is hot in the room;" why had the heater been turned up. Jean said, "I was cold." The Stone Center group went on to try to understand why Jean had stated her experience as a subjective one while her husband had stated his experience as a seemingly objective one. Wolstein's response to this was that Dr. Miller had a long way to go.

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Women analysts' interest in male and female patients' reactions to female analysts and to the obvious vicissitudes of their lives (e.g., pregnancy) was at odds with strict beliefs about the anonymity of the analyst and more in keeping with an interpersonal orientation. This work easily built on and found sustenance in Ferenczi's groundbreaking views. In the last twenty years there have been a great many papers on the impact of varying gender configurations of patient and analyst on transference and countertransference (e.g., **Gornick, 1986; Gruenthal, 1993; Hirsch, 1993; Person, 1985; Shapiro, 1993b**). We can see here a specific area of confluence between the interpersonal school of psychoanalysis and the work of feminist psychoanalysts who have focused on what Gornick (1986) has called the "new narrative" in psychoanalysis. But still the writing remained descriptive.

Some of the earliest reconsiderations of psychoanalysis by second-wave feminists were sharply critical of Freud's uninflected views of women and key concepts in his understanding of psychological development, especially female development. The case of Dora, more than any others, has come to signify the powerful impact of his unexamined patriarchal, heterosexist assumptions. Critiques of this case study have literally filled a book (**Berhneimer & Kahane, 1990**). Harris (1991a) has also given us a wonderful rereading of Freud's analysis of a case of female homosexuality. Later theorists were often seen as antiwomen because of their tendency to blame all difficulties in an individual's psychological development on the mother (e.g., Fromm-Reichmann's schizophrenogenic mother). These theorists seemed unaware that women were damned if they were uninvolved with their children, but if they were the sole parent and anything went wrong, they were also held responsible.

In the early 1970s, before psychoanalytic feminism had provided a new lens with which to understand women's lives, psychoanalysis was seen by many feminists as the enemy. Despite the fact that they distrusted it, though, many second-wave feminists somewhat reluctantly entered analysis around this time, generally with a male analyst. They set out to explore the new, yet old, contradictions between outward strivings and inner beliefs, between the desire for family and career, power and dependency, sexuality and respectability. In the years since the turn of the century, as psychoanalysis had become institutionalized, a smaller percentage of women had received analytic training, and psychoanalysis, at least in America, had repressed its more radical edge (**Jacoby, 1983**). The smaller percentage of senior women analysts, as well as some distrust

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trust of women of that generation (a form of internalized misogyny, as well as an outgrowth of the specific conflicts between generations of mothers and daughters), explained why many young feminist analysts in training chose senior male analysts. In addition, the possibility of an egalitarian feminism based in gender critique had yet to be articulated. As a result, these young women analysts expected that these older women would want them to make the same kinds of choices that they had made—that this older generation took gender differences for granted, just as they seemed to take heterosexuality for granted. It seemed to many women in my generation that the previous generation of women, especially because they easily represented our mothers, would try to "shrink" us into conventional sex-linked roles. To women who came of age in the 1960s the previous generation of professional women often appeared to have covered its tracks with a superficially conventional facade—a variation on Riviere's (1927) womanliness as masquerade—and they anticipated a judgmental response to their efforts at greater gender fluidity.

The next wave of psychoanalytic feminist theorists could not come from the mainstream Freudian or interpersonal-cultural institutes. The decisions these institutes had made to exclude or limit non-M.D. analysts, and their attitude toward training people with unconventional academic or psychological backgrounds, constricted the flow of new ideas. The move at the White Institute toward a focus on specific dyadic interactions reduced the energy that could be spent on larger political and social currents. Fromm, the most political of the interpersonal analysts, spent his later years in Mexico and so was less involved in clinical training. The New York University Postdoctoral Program, with the mandate of its founder Bernie Kalinkowitz for pluralistic training in an atmosphere that treated candidates as adults and that minimized the religious, ideological atmosphere traditionally associated with analytic training, proved the perfect fertile environment for a new generation of psychoanalytic feminists. Jessica Benjamin, Muriel Dimen, Virginia Goldner, and Adrienne Harris, trained in a variety of ancillary social sciences, with identities forged in the antiwar and liberation movements, brought new life and new thinking to the rich dialogue of ideas that emerged in the 1980s.

The liberation movements of the 1960s and 1970s had birthed a generation of women trained in the social sciences (sociology, anthropology, and psychology) and politically awakened by the struggle to break free of McCarthyism, the Cold War, and Vietnam. These women, recognizing

the interaction of individual and collective liberation, once again joined the insights of Marx and Freud, but now added psychoanalytic feminist theory. That development, in turn, furthered the development of relational psychoanalysis (see **Aron, 1996**). These traditions had been joined in the theoretical writings of N. O. Brown (**1959, 1966**), E. Fromm (**1941, 1947, 1955**), and H. Marcuse (1957, **1964**), but only Fromm had a clinical practice (which was considered very conservative in actual clinical style), and none of these writers recognized the subjugation of women in Western patriarchal societies.

Gayle Rubin's (**1975**) "The Traffic in Women" is a watershed moment. She brought together psychoanalysis, Marxism, and cultural anthropology in an analysis of women, the family, and sex. The influence of psychoanalysis as practice and intellectual discipline, as well as the possibility of financial independence, led several women, originally trained in the social sciences and working in academia (e.g., Benjamin, Chodorow, Dimen, Harris) to enter psychoanalytic training. The infusion of social scientists into psychoanalytic institutes introduced psychoanalysts to the work of Gayle Rubin (**1975, 1984**), Dorothy Dinnerstein (**1976**), Adrienne Rich (**1976, 1980**), and Michel Foucault (1978), and the wealth of information in interdisciplinary feminist journals (*Signs* and *Feminist Issues*). Jessica Benjamin, trained in the tradition of the Frankfurt School, and Muriel Dimen, trained as a cultural anthropologist, brought new insights and critical perspectives to the theories they were studying in their analytic training.

The political force of feminism brought society's attention to various injustices that powerfully affected women's lives and psychology. Specifically, the opening of rape crisis centers not only further focused attention on the prevalence of rape, but also, as these women told their stories, increased awareness of the prevalence of prior histories of childhood sexual abuse. Interest in the prevalence of rape also led to greater acceptance of the everyday reality of domestic violence generally, as directed at both children and spouses. The battered woman's need for shelter also furthered understanding of the ways in which the justice system historically had failed to protect women. All of these social issues impact on women's psychology, on the prevalence of depression, on sexual difficulties, low self-esteem, and so on. Nonprofessionals working with these women pushed for change in the conventional psychoanalytic views of women's issues. The voices of women were soon joined by the voices of gay and lesbian men and women (**Blechner, 1995; Corbett, 1993, 1996;**

Domenici & Lesser, 1995; Drescher, 1998), who also pushed for a reconsideration of what behaviors were deemed normal and desirable. The social criticisms developed in other fields and imported by Benjamin, Chodorow, Dimen, Goldner, and Harris expanded the vocabulary available for psychoanalysts. We sought to understand a greater complexity and diversity of human paths.

Back to Transference

In light of all of this research, perhaps I can risk looking at the fears I had in the early 1970s when I viewed Dr. Moulton from afar. After all, my contention is that even though my reactions were based on my personal pathology, they also, in all likelihood, had a great deal in common with those of other women of my generation. I was still early in my career as a patient, and so all analysts were objects of intense transference. I had had more than my share of humiliating experiences and interpretations by male therapists who questioned my female identity because I generally wore jeans (this was the 1960s in Boston). On the rare occasion that I wore a dress, the psychiatrist noted that I didn't sit like a lady and he could see the color of my underpants. Sexual information and contraception was hard to come by in those days, and I was told not to expect to have orgasms until I was married. The price I paid for getting birth control from a local gynecologist was to be lectured on the immorality of my acts. Hip classmates routinely lied about their sexual exploits, and being liberated and cool meant saying "yes" to guys and not paying attention to what I wanted or needed. Most of my friends were equally anxious about their performance, and truth was in short supply. Date rape as a concept was nonexistent and any unwanted sex was definitely my fault.

I could have benefitted enormously from a CR group, but I completely misunderstood the women's movement in those years and thought I didn't need it, because my own mother was so atypical of my friends' mothers, having dramatically left my father in 1953 in order to go back to school and pursue her love of music. She became a leading professor of musicology while I was in high school, and we often had other women professors over to the house. I always knew I wanted to work and didn't want to be financially dependent on a man—so what could I need from the women's movement? I didn't think it significant that there was continuous anxious attention to appearance, weight, and hairdo, or

that the form taken by my mother's lingering insecurity is best conveyed by the time she invited me to participate in an elite interdisciplinary seminar, simultaneously warning me not to say anything when I was there, because everyone there "was so smart."

And then there was the issue of children and families and cooking. On the one hand I had been determined to

avoid learning any “feminine” skills, like cooking or sewing and cleaning, but on the other hand, I felt inadequate and suffered from the awe of grown women so powerfully described by Dorothy Dinnerstein. While I was always “good” with children, in my mid-twenties I was acutely aware that I was not yet a mother and in that sense I felt like a little girl.

I couldn't really address my complicated relationship to my mother with a male therapist, because male therapists generally were only critical of her and horrified that she had left my father. I knew that this had been a good thing both for her and for me, even though I certainly suffered the consequences of a nasty divorce. But if I couldn't confide all this to a male analyst, I was also too frightened by the example of my mother's envy and competition to trust being in treatment with an older woman. My first analysis with a woman was marred by her constrictedness, overt envy, misunderstanding of my sexuality, and by my own sense that her strivings were smaller than mine—I wouldn't be satisfied with the life I thought she was offering me. Much later I realized that I also feared experiencing the longing for maternal warmth and support and the potential for regression that it might hold.

I needed to find my way to a woman who, like Clara Thompson, recognized the need for creating and accepting alternative life choices for women—choices that could include single parenting, serial monogamy, or even some form of communal living. Perhaps if I had been less frightened, I might have recognized that potential in Ruth Moulton.

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