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## **Object-Relation Changes in the Analysis of a Fetishist<sup>1</sup>**

by

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Recent work on fetishism (**Payne 1939**), (**Gillespie 1940**) and (**1952**), (**Wulff 1946**) has sought to clarify the meaning of fetishism in terms of early object relations. In writing about the analysis of a fetishist I have chosen to focus on the changes in object relations which took place during the analysis and especially in its closing phases. I shall try to show something of the interplay of the analytic relationship, and how changes there produced movement towards a gradual reordering of the patient's inner world and of his attitudes to people. The emphasis will therefore be not on the fetishism as such but on the character disorder behind it. Indeed it is now my conviction that in all sexual perversion what matters most is the turning away from the primary object, and that what most helped my patient to discard his fetish was not interpretations bearing directly on the fetish but work on his intense paranoid and depressive anxieties (the former open, the latter concealed). These anxieties had origin in his early relations with his mother, impeded relationships with women throughout life, and ultimately became the focal point of his analytic relationship with me.<sup>2</sup>

My patient came to analysis wishing to free himself from the anxieties surrounding his mackintosh fetishism and seeking help 'to live a normal life'. The work was brought to an end after five and a half years and approximately 900 sessions.

He came for treatment at the age of thirty-one, a schoolmaster, an only child, single, living alone with his parents. They came from Scottish artisan families. His father was a true craftsman and latterly manager of a workshop; but his mother, formerly a dressmaker, was socially ambitious and determined that her son should not 'work with his hands'. The patient was sent to a private day-school, from which he obtained a scholarship to a grammar school. To be top of the class was the key to maternal approval. He worked hard and eventually obtained a university scholarship and a first-class honours degree.

But at thirty-one he was leading a very restricted life. All social relationships were a source of embarrassment to him. His work relationships as a teacher were tolerable only in so far as they were defined and controlled. Protected by the formalities of the 'teacher-pupil relationship' he could teach, but end-of-term parties were a nightmare to him. He was afraid of the headmaster but sought his approval. Colleagues were thought of, quite consciously, as dangerous rivals, while subordinates presented so acute a threat that he always tried to avoid having one. The arrival of a new trainee in his own department was always an occasion of crisis. His work embodied a delicate balance of neurotic satisfactions and neurotic anxieties; it was competent but rigid.

He had few friends, no general interests. He liked eating but felt guilty about it. He also enjoyed defaecating. Apart from these two pleasures, a satisfactory evening was one spent idly by the fire, grumbling inwardly. With his parents he lived in a bickering deadlock. His overt relation with his mother was one of mutual exploitation: he supported her against the father; she waited on him hand and foot. He was a vegetarian, a pacifist, and in war-time a conscientious objector.

There had been in his life perhaps half a dozen inhibited friendships with girls, pseudo-platonic and mutually frustrating. On the one occasion when, at twenty-four, these inhibitions appeared likely to be broken down, his parents interfered and he accepted their interference.

In appearance he was plump, open-faced

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almost cherubic; but his appearance was deceptive, since it concealed massive hostility and a troubled mental life. What it revealed was his wish to go on being the baby. Indeed, it soon emerged that he thought of himself as a little boy and resented the expectation of the external world that he should accept adult responsibilities. He would do so only for infantile reasons—to placate the grown-ups and win their approval. He consciously wanted them all, parents, headmaster, analyst, and strangers—to make a fuss of him and single him out for special commendation.

Though the infancy continuing in the present was manifest from the outset, accounts of his actual childhood emerged slowly. From time to time he would fish for information from his mother. She told him that he was conceived before they were ready for a child, in wartime, when they were very hard up; that he was breast-fed for eleven months and then weaned abruptly with bitter aloes. From that time on he rejected milk. He was said to have been a lazy feeder. Vague and frightening memories clustered round his circumcision at two and a half, advised on account of some difficulty in passing urine. As the first grandchild on either side of the family, he received much attention, and teasing, from grandparents, uncles, and aunts. In confirmation of his memories his mother admitted having controlled him with threats—threats to go away and leave him, threats not to love him any more, threats to have another little boy who would be better than he was. He remembered scenes of this sort. They would end in panic, capitulation, and tears, leading to a superficial reconciliation, but always with a residual undercurrent of hostility on both sides.

The story she told him of her own childhood was an unhappy one, marred by harsh and troubled relationships with both her parents and considerable hostility towards the younger siblings whom she had to look after. Very bitterly she remembered being thrashed for dropping the baby—her only brother. Her courtship by the patient's father proceeded under the restrictive and threatening vigilance of two rigidly respectable working-class families. She married to get away from home and was doubtful about wanting children. Her marriage became a struggle for dominance which she finally won. In middle age she was volubly domineering, efficient and meticulous, prudish and house-proud. Neither husband nor son must set foot on her floors without changing into slippers. She fed them well and controlled them.

The father emerged as an irritable, taciturn, but long-suffering man, who only occasionally exploded; partly accepting his wife's depreciatory view of himself; disappointed, but secretly proud of his humble origins and manual skills; contemptuous of his wife's pretensions. He would consent to leave behind the old house in a row for a new one in a suburb, but he would not leave behind his Scottish accent, his delight in crude humour or his pungent turn of phrase. His own tyrannical father had been 'as proud as a dog with two cocks' and so, more secretly, was he. His defiance of his own strict mother, of his wife and of the world was epitomized in another of his phrases— 'shouting shit up a short entry'. Womankind and genitality were defied with mouth and anus, and all his spare energy was devoted to his garden.

During his childhood the patient had sometimes turned to his father, in transient efforts to appease and seduce him at his own anal level. Thus, he recalled sharing a bed with father and maternal grandfather together, at age six or seven, amusing them both with competitive farts, and being told, 'Give us a whistle, kid!' when they reached for the chamber-pot. They laughed and joked, but his was precarious laughter. For their tolerance was felt to stop short of genital matters. Though his father took pride in never having 'put the fear of God into him', the patient was afraid of his big hands and big penis and wilted under mockery and castration threats against his own little 'winkie'. His fears of castration were acute.

Such were the parents whom he introjected and unconsciously brought to analysis. Another important person was Aunt Bella, his mother's next younger (and prettier) sister. She lived next door with her parents, until the patient was nine, and then came to live with his family. He remembered her as a teasing young woman who exploited her young men. In his earliest years the patient had slept between his parents. Then for some years he slept alone. Now, by mutual consent, he shared a bed with his aunt, until he was twelve. He liked her to touch and stroke him but was often rude to her when visitors came. On one occasion he had an emission while the whole family was sitting round the fire and Aunt Bella was casually stroking his bare knees.

It was her blue mackintosh which became his first fixed fetishistic object. He was then thirteen. Having to deny the erotic attraction she exerted, he took her mackintosh as a substitute. After what might be described as a period of courtship, he learned to masturbate with it. But macs had attracted him long before this. He remembered as a small child being reprovved by his mother for burying his face in a visitor's mackintosh. Later on he enjoyed having one put over his head in games with other children. Now, in adolescence, he began by burying his face in his aunt's. Sometimes he used to lick it, but that was unpleasant as it did not taste nice. The problem was how to show his feelings for it, how to express his worship. Smell was important, and so was touch; he liked the cool smoothness of its rubber lining. Sometimes he would stand naked inside it or lie naked with it over his body and head. A special excitement was added if he could obtain a feeling of suffocation. Later, other women's mackintoshes would do, if they came to hand easily, but there was always a prohibition on his mother's. When none was available he would masturbate with the memory of one seen during the day, and the fantasy, 'She's got me! I've got to yield.' To attract him, the outside must be smooth and shiny, self-coloured rather than patterned, and free from blemishes of any kind.

At different times, associations to mackintosh material led him back to the anaesthetic mask on the occasion of his circumcision; to his aunt's rubber apron; to his mother's sweaty smell, and the suffocating impact of the breast itself. This was one unconscious meaning of the word 'overwhelming', which he frequently applied to his mother. The mackintosh offered links with infantile ecstasy and with olfactory incorporation of the mother: 'The smell of a mac is so good it goes right down inside me, into my entrails.'

Sometimes what he did to the mackintosh was felt to defile it, and the garment could be seen to afford a protection to the real object. But the most prominent and persistent theme was contained in the following statement: 'The difference between a mackintosh and a woman is this—the mac has no power over me and can't hit back. Being inanimate, it can't withdraw its affection. ... It can't do anything to you, can't hit you or scold you or control you; instead it can be controlled.'

Having found his mother's love expensive to obtain, he developed techniques for doing without it. He conformed and he exploited. As the analysis got under way that conformity began to break down. He reported an incident in which he had suddenly challenged her. She had replied: 'Now don't start being rude to me, because I won't stand it: it may be all right with your father, because he's a bully by nature, but if you try it on me you'll soon regret losing the best friend you ever had.' He thought, 'This is what you've always done to me, but it doesn't work any more.' Resentment of the power which he felt women, and especially his mother, sought to exercise over him, filled session after session. His relationship with his mother was permeated by a feeling of injury which he termed 'the Grudge'.

As the analysis went on, he tried to give up both his passive attitudes and his fetishism. This brought him face to face with his terror of real women, whom he regarded as predatory and persecuting, and of their genitals, and of the babies which they might conceive, which would rob him of their affection, which he still needed desperately and exclusively like a very young child. At this stage the only satisfactory intercourse he could imagine for himself would be with the corpse of a woman he himself had murdered. That would be his revenge—his triumph in place of theirs. He imagined it with his mother. She would be dead, like a mackintosh, and so could not laugh at him or abandon him; the act would give her no pleasure (that was essential); he would use his penis like a sword to gouge her inside out; above all there would be no baby to rival and displace him. He hated babies and often imagined destroying them. He would rage and shout as he spoke of these things and sometimes it seemed that only a fit would discharge the emotion he was trying to express.

From time to time the patient was appalled at the extent and intensity of his hostility now made manifest. Meanwhile, he tried to preserve me from involvement in his attacks, making me the repository of the good qualities denied in his mother and strongly resisting every interpretation of the hidden negative elements of the transference. There was, however, much testing out of my capacity to tolerate his badness. He did not intend to change because, 'Unless people are prepared to love me as I am, their love's not worth having, and they can go to hell for all I care.'

After two years of analysis the patient met a girl who proved, for reasons of her own, ready to love him as he was, even when he told her of his sexual difficulties. He found her sensitive and tolerant, 'a quiet girl with beautiful eyes and a soft voice'. Hilda seemed to him the opposite of his mother. She profited from his emerging guilt, becoming at times the good mother and at times the unborn sister, to whom reparation could be made. But he got more satisfaction from being loved than from loving. His love was infantile in character, and throughout their twelve months' courtship he still experienced, intermittently, upsurgings of irrational hostility and hate. In mutual masturbation he was afraid of her genital, afraid of his semen coming near her. The changes wrought in her by sexual excitement repelled him; he could not bear her to become 'just like a wild thing'.

Throughout the third year of analysis much work was done on these and other related anxieties. In more ways than one, Hilda replaced the mackintosh, though macs remained attractive to him when she was absent. But his marriage, at the end of this time, was still premature and neurotic in character. I could not but feel profoundly uneasy about it. To the patient, as to his parents before him, marriage was partly an escape. The wedding ceremony would represent, as he said, 'a formal and legal break from my mother.' When they married on 1st April, he proved impotent. The 'April fools' included the patient, his wife, his parents and his analyst.

During the honeymoon, in desperation and misery, he bought a mackintosh for his wife, but even that made no difference: 'She had the effect of neutralizing it, just like my mother.' Everything was disappointing. 'Hilda undressing was just Aunt Bella undressing; getting into bed with her was just creeping into bed with Mum.' The only thing that helped was when they fought a little, 'like boys'. Then he was able to penetrate the hymen; but he feared to penetrate deeply and wanted to get out as soon as possible. Whether he refrained from these attempts or persisted, she became, on one level, more and more identified with the threatening aspects of his mother. On another, he resented the very opposite of this—her dependence and unphallic femininity.

In his imagination, what he wanted at this time (on his return from his honeymoon) was not the warm Hilda, but a cool, aloof woman, who would stimulate him without herself becoming excited, and say, as he lay on his back, 'I know that little boys like!' It became clear that this imaginary, phallic woman, who usually appeared in a mackintosh, represented Aunt Bella, and ultimately the apron-clad mother of his infancy attending to his toilet, amongst a mixture of interesting smells. In the background there was felt to be a father, who would not grudge him these infantile pleasures so long as he did not grow up.

It was some such safe retreat into infancy that he now increasingly sought in the analysis, which he wanted to go on for ever. I was to be this phallic mother who would caress, excite, and protect him. Alternatively, I was to be a seducing male, with whom he could find refuge in homosexuality. But these and other defences proved untenable. They could not save him from rapidly mounting persecutory anxiety. There followed a chaotic period of about three months, during which he fled from one position to another with great rapidity. It was difficult for me, with very limited skills, to follow and deal with the material quickly enough.

His fears of intercourse emerged in great profusion and at all levels. In genital terms: no drop of fluid from his penis must go anywhere near Hilda—it would produce a son who would inevitably destroy him. In phallic terms: he was afraid of his penis touching a baby inside and of what it might do to the baby. In anal terms: Hilda's inside was a horrible place—a mass of shit (a projection of his own 'rotteness' and a product of his own attacks). In oral terms: the vagina was a hungry mouth with teeth and would bite his penis off (a projection of his own biting impulses). But the more he avoided intercourse the more did his wife become identified with the feared, attacked genital- mother. He tried to use me, as father, to control her, in a revived infantile masturbation fantasy. He said, 'I wish you'd come home with me and fuck her, put your penis right through her and skewer her once and for all.' I said this was what he had wanted his father to do to his mother—then there would be no more babies and no more dangerous, threatening genital: it was for this, amongst other things, that he felt himself punished by his circumcision. When this control failed, he resorted to a more primitive one—an infantile outburst of screaming. His early inhibition of biting was now swept aside, and the impulse to strangle his wife was at times more than a fantasy.

Meanwhile he was talking of separation or

divorce and attacking me for not preventing the marriage, not giving him potency, and not being myself the ideal breast-mother. His attacks were similarly varied, but predominantly biting and castrating. 'You're only a bloody student anyway!' Then in a moment he would feel guilty and afraid. He complained of feeling that there was a vulture inside him, tearing everything to bits. I said this was the return of his own vulture impulses: the attacked mother and analyst were now in him.

After a dream of eating, he wanted to eat his wife's vulva, eat his way in and devour the imagined baby. That would be the best way of getting rid of it—chewing it up and converting it into shit. That was what he had wanted to do to his mother, he supposed—to eat his way into her—to eat off the good parts, the breasts, and get rid of the rest of her, the horrible part which went off and mucked about with his father. It had always seemed incongruous that anyone as horrible as his mother should have anything so attractive as breasts. (It would be difficult to imagine a more complete split between the breast-mother and the genital-mother.)

He controlled these impulses by eating enormously. 'When I get annoyed with the kids at school, the only thing that brings relief is a good meal—eating them I suppose—perhaps that's why I'm a vegetarian.' I tried to show him how all these bitten-up and eaten people had become the source of all the tormenting feelings inside—the mass of shit and the dead rats, which he referred to. He said, 'That's why I so hate to be constipated.'

In the same session he spoke of his semen: 'Sixteen million sperms per cubic centimetre, and every one malevolent.' No matter what precautions he took, one would get through to make his life a hell. Here was the quintessence of persecution. His sperms contained his impulses. He contained them and they threatened him. As Mrs. Klein would say, his sadistic and cannibalistic desires were expressed by his parts and by his products.

Clearly, there was here too a belief in a fabulous potency, enormously destructive. His impotence was, in part at least, self-disarming, for the protection of his objects. This was confirmed by his thoughts of self-emasculatation, which he believed would make him gentle and give him a smooth skin: 'The bristling part of a man is the fierce, aggressive part'. Further confirmation came when this line of interpretation eventually proved effective.

In the autumn his fears were intensified by two events. A friend became neurotically ill, and the impulse to tell him of the clinic was checked by a fear that this man would come to me and so displace him. Secondly, inspectors of education were to visit his school and he felt a desperate need to win their total commendation: 'I've got to be the best, the admired one: anything else is intolerable.' He hated the people in the newspapers and even the authors studied by his pupils, because they got so much attention: 'Who's bloody Shakespeare, anyway?' His greed and envy were projected: everyone was out to rob him and triumph over him. The split and projection were uncovered. After a particularly intense persecutory outburst, I said that he was evading guilt and despair by putting into other people all his own hostile and robbing impulses, making himself the victim, and then using that situation to justify still further demands on everybody, and especially on me. All this was to fend off the fear of feeling utterly unlovable. It was because he felt so bad that the idea of any new patient coming to the clinic carried with it the certainty of total deprivation. This was the desperate fear aroused long ago by the thought of his mother's unborn babies.

He came to the next session wanting to vomit. I interpreted his wish to get rid of his hate and of 'the Grudge'. He made further attempts to justify it—people were hostile and excluded him: that was what made analysis so satisfactory—analysis excluded all the others. I interpreted his wish to repeat endlessly with me the almost exclusive relation he had once had with his mother; his unwillingness ever to relinquish analysis contained all his reluctance to share her. He said, 'The trouble is I've nothing to share, nothing to give except badness. I have to admit I went home quite humbled last night.' I said this was a tremendous admission. He said he could admit things to himself at times, but not to me. I said this was because he unconsciously thought of me as hostile, and again interpreted the projection. He said, 'Damn you for making me feel sad! It's so much easier to feel angry.' I said that was always his solution, to replace sadness by anger. He said, 'It's the only one I know, and it's safe.' I pointed out his denial of the cost: anger was wholly destructive; with sadness there was some possibility of putting things right.

This session seemed to be a turning point in the analysis. Soon he had new thoughts about having a son. Part of him would like to, and



sometimes he could believe it would be safe to do so. He became able to let people hold opposing views without feeling threatened and hostile; he could allow them to be themselves. He felt more comfortable in not feeling full of hate. I said the comfort came partly from relief at not having to fear and guard against retaliation; being no longer afraid he felt less need to control. He said, 'Simply not to hurt anyone seems the important thing just now: not to hurt you or Hilda.' His relationship with her began to soften. 'I used to make infinite demands on people, to see how much I could get out of them; but when I know they like me it ceases to be fun.' I related this to his demands on me and to the end of the analysis: it meant that he could begin to think of it as a completion and not as a rejection. He said, 'I've come over, I'm on your side; but I don't feel happy about it, just empty. I want to go away and weep.' I asked why he could not weep here. He answered, 'Fear you would laugh, I suppose.' I said that he still saw me as a potentially hostile, mocking person. The retreat to persecution could take place in a second.

This was but the beginning of a long to-and-fro struggle on this theme, which dominated the remaining 21/4 years of the analysis. He slipped back many times and presented many difficulties, but he never again became so severely ill as he had been in the months which followed his marriage. One night, after moving into a new flat, he found himself singing to his wife in bed. After many songs he came to a lullaby which he suddenly recognized as one sung to him as a child by his father. He wept profusely and could feel that his father had loved him and that he had loved his father. These were adult tears and meant a coming to life of feeling for another person, with mourning for loss and grief for injury done. At the same time he had become able to identify with the father and love the baby, whom his wife for the moment represented.

This led to the theme of depriving his parents of children and me of other patients and other patients of me. The proposal to reduce from five sessions to four aroused deep resentment, and for the first time the idea that the analysis might end became real to the patient. The analyst became more directly the depriving mother: 'You've become bad— this is bitter aloes.' He sought for substitute satisfactions: he might take a Ph.D. and have a professor to supervise him; or he might cultivate some hobby—'People are worthless but things can't let you down.' He recognized that this was the fetish reaction over again. He thought I had been careful to wait till he had lost his interest in mackintoshes, but he could revive it.

Depression emerged spontaneously now. A moth on a coat was himself eating me. He feared that he was making Hilda old: either his semen had poisoned her or he had not given her enough. The dilemma between starving and poisoning was related back to the analysis. he began to look forward to a perfect intercourse with his wife in which they would have simultaneous orgasms and deliberately conceive a baby. Then it could be good. Intercourse did indeed become physically more successful about a year after their marriage, but there was guilt about hostile fantasies, in which he thought of himself as a torturing machine. Orgasm was meant to be the death of Hilda and he felt almost humiliated when she liked it, but he also felt relieved.

There was an oscillation between splitting and unifying his objects. Fantasies of promiscuity emerged for the first time and were symbolized in blushing whenever another woman's name was mentioned in the presence of his wife. Tormenting Hilda in this way meant punishing his mother for going off with father. He was aware of rapidly alternating attitudes: one minute he would want to copulate with the woman and kill her; the next he would want to be the little boy, 'getting something from the woman on the side' (i.e. from the breast) while she got what she wanted from some more powerful man.

The most difficult feature of the last two years of the analysis was an attempt by the patient to organize a permanent status quo, centred on the analysis, which he tried to turn into a symbolic gratification of all his infantile needs and wishes. He thought, 'I could lie here for ever'. I said he was announcing his intention to keep and control me for ever and not let the analysis affect him. He said that to modify his behaviour in the slightest degree meant giving way to his mother; yet behind all his hatred of women there was a wish to love them very much. I interpreted the violent greed of that love, and its vicissitudes, in detail, and the intensity of his need to control and dominate those he loved, absolutely. He said, 'I suppose my mother's love for me was like that.' The analytic relationship at this time showed many of the

features described so sensitively by Mrs. Riviere in her paper, 'On the Negative Therapeutic Reaction'. Thus, progress would be concealed, as when he casually mentioned eating meat weeks after the change had taken place. Successful intercourse was concealed, or even avoided, lest I should send him away as cured or as too dangerous a rival. What he most feared was the destructive and devouring quality of his love. Analysis must be resisted lest it lead him to rape and murder. It was safer to remain a child.

When I was going on holiday, early in the fifth year, he killed me off in his thoughts and then complained of feeling empty. I said that this was the penalty of all this killing off: he was left with nothing good inside. He said, 'That's why I'm never able to go back to old places and old people—they're too much like ghosts.' All his objects were dead, and the task of restoring them would be beyond his powers. The education inspectors reported that his contribution was outstanding, but to the patient this was a mockery: they did not know what was going on inside. It was my 'inspection' and his own that mattered to him now.

By the end of the year he was able to have intercourse which was violent but loving and free from sadistic fantasies; for the first time he could describe it as 'really satisfying' to both of them. He was able to discard contraception, really wanting a child. I am baffled by the task of describing briefly how these changes took place. Obviously they involved a re-evaluation of his wife, whose sexuality became more acceptable, a reevaluation of his penis and semen and of his own capacity to give, a recognition that love could be violent without being destructive, and a reduction of his fear of rival babies. Hitherto, breasts had been the only source of anything good, infinitely tantalizing and always withheld from him. Only breasts were attractive, not vaginas; without breasts he had nothing to give; his penis was not good, it was only a weapon of attack. Now his tremendous envy of all feminine parts and reproductive function became fully conscious. But not less important than the work specific to these themes was the continued work on his paranoid defence. It was this that enabled him, I think, to make a beginning of loving. The patient felt, and said, that change would involve intolerable risks—risks of liking people instead of hating them. Then he would want them and not be able to have them, and then he would have to find new reasons for hating them. I said that 'wanting' here meant wanting exclusively, at once, all the time, without limit; and sooner than give up anyone he wanted he would destroy them. He confirmed this, saying that he could not go to a certain social function because the people there might be nicer than he expected; their niceness would disarm him and then he would want them, especially if they became interested in him. Perhaps my wife and I would be there. He heard a plane outside and imagined it dropping a bomb on him. I interpreted his fear of attracting my wife to become exclusively interested in him, and incurring a terrible bombing revenge from me; that was what he had wanted of his mother and feared from his father; hence the defence of hating (not wanting) his mother; hence also the flight to the mackintosh and the denial of genitality in trying to remain a little boy. Soon after this he was able to appreciate the essential niceness of an attractive girl, and like her, to realize that he could not have her, and feel sad about it. He was able to like and relinquish. The ability to have a good and loving intercourse with his wife was an immediate sequel.

One month later, he announced, 'We're probably going to have a baby.' There was pride and satisfaction in this, but the prospect reactivated old anxieties, especially the fear that I would end the analysis. He tried to cancel out all improvement and spoke of staying in analysis for the rest of his life. But he had more insight now. He said, 'The trouble is my basic unwillingness to give anybody anything; I don't want to give you a got-better patient; really I'm just one big mouth.' I said he wanted me to love and feed him endlessly, in spite of everything, in order to reassure him that he was not bad and that I did not turn to others because he was bad, and in order to relieve his emptiness within. For a time Hilda became his mother to whom he had given a baby; father would come after him and in 'the battle of penises' he would not stand a chance; father's would slash his off right away; father would kill him with his penis, like a burglar pinned to the wall. To forestall this he wanted to get my penis which would be even stronger. His derogatory attacks upon women had been in part designed to this end—to turn me away from women, so that I would give him the wonderful penis. He feared that at Easter I would tell him not



to come any more: I must be thinking 'It's not safe to cure him completely—he would be too dangerous.' Part of him was equating cure with freedom from all restraint. His appetite for sexual intercourse might become insatiable. Then he thought of an attractive woman in a mac, tall and sleek and dominating: it was as if she not only had a penis but was a penis—so powerful and erect. Women were so cocksure because they had the men's cocks safe inside them and were certain of being able to overcome his. It was as if both his parents were bearing down on him and saying, 'It's got to come off.' But part of him welcomed castration as something exquisitely exciting—being subdued. He felt that having his penis played with was a form of castration; so was playing with a mac and getting under it; a woman's mac was like a penis which came into him by way of its smell. Among other interpretations on this material, I said that passivity was the price of safety: he saw me as ruthless because he felt ruthless in his intense wish to overpower and castrate the dominating father, headmaster, analyst. He confirmed this, saying that he wanted to be the 'big shot', the one with the all-powerful penis.

More material emerged now about the positive and protective side of his retreat from potency, which had hitherto meant being ruthless, not caring, riding roughshod over everybody. At the same time, the patient began to talk spontaneously about the end of the analysis. He wanted to spend his money on other things. But if he made the slightest move to end it he would fear pursuit by a hostile and jealous analyst-mother. That was why he tended to keep his relation to Hilda bad except during the holidays—to fend off jealousy from me. When this had been worked through he spoke of a wish to get better before the child came: he could not have a baby and be a baby. He felt that an end was possible now because the analysis need not end in hate.

He commented on his 'grizzly' behaviour here in the analysis, day after day. Then he mentioned some changes in himself and added, 'But you don't change.' I interpreted the meaning of his 'grizzly' behaviour—to force me to change, to abandon everyone else and come over exclusively to him. He responded, 'Yes, to get you on my side against the rest of the world.' I said, 'Thereby justifying all your attitudes.' After a pause he said, 'I am getting better but I do resent it.' I said, 'Because from the very start analysis was for you a struggle over who should change, a defence of prepared positions and a determination not to feel in the wrong'. His grumbling was also described as filling me with slow poison, i.e. getting rid of his hate by putting it into me—returning the bitter aloes. Later it became clear that not coming to me with complaints would also mean dropping the role of inadequacy with which he protected himself from others' aggression and them from his.

In March I proposed that the analysis should be reduced to three sessions in April and end in December. His first response was, 'Then I shall never be the wonderful fellow I hoped you would make me!' I pointed out the expectation of a magical transformation. This and the wish to keep the analysis going indefinitely had been great obstacles to progress. Then he wondered whether he would go away feeling warmly towards me or hating me. There was a great wish not to hate me, even if that meant changing his attitudes to everyone. He felt I was sending him away as a failure, but added that perhaps that was what he had wanted to be: it was one way of proving himself stronger. He had a sudden hostile thought 'I'll show him', but recognized at once that that would not really be change. I said he was recognizing that precarious achievement based on hate was not satisfying. He observed that till Christmas was about nine months—time for a new self to be born. In a way he felt freer, now that he knew the analysis was going to end. I said perhaps he felt that so long as I appeared to let him be a baby I was also tempting him to be one. He said, 'I often felt my mother didn't really want me to grow up.' At the end of the session he was near to tears: tears of sorrow for parting, with recognition of having received a lot.

In succeeding sessions, the patient sought to grapple with the pain of sadness and with the task of reparation. He said, 'There's no alternative to hating except to be sorry, and that's very disturbing.' He felt sorry for having mentally chewed me up all the time and wanted to restore me. Later came the fear that I had chewed him up every time he chewed up me; that his parents had done so whenever they nagged him; that he had forced us to do this by his attacks, and that it would be useless his trying to put us together unless we all put him together too, inside us. This was a complex and over-determined thought. I took it

as a recognition that in destroying his objects he had destroyed himself. It was also a cry for help. He felt 'rotten' inside and could not offer this rottenness to anyone. Hitherto he had kept his damaged internal objects at bay by projecting. Now that he could do so no longer he became hypochondriacal: his varicose veins were a punishment for all the bad he had done—a product of 'bad blood' between himself and others.

He saw that he had never allowed his parents to belong to each other and that they had undoubtedly been happier since he left them. There came the terrible realization that people had not existed for him except when he wanted them; he had never allowed them any independent lives, had abolished them as soon as they ceased to be of immediate use to him; he had never taken pleasure in their living. That meant he had never really loved anyone.

The patient feared that if he allowed his sadness to come out it would be so overwhelming as to be quite unbearable; if he allowed himself to think that people were nice he would be overcome with remorse. I pointed out that he was still keeping these feelings at a distance—it was all hypothetical. He acknowledged a terror of depression. I said that this was what he had been avoiding for the past five years, but the cost was paid in hate and the fear of retaliation, in frustrated inertia, and in physical symptoms, the products of internal attacks.

He came the next day with a carbuncle and hay fever. He saw in the carbuncle the badness he was trying to get rid of and in the hay fever the tears he could not shed. He thought of a sea of blood—as if his tears would have to equal all the blood shed in his thoughts before he could recover. Then he wanted to be forgiven by me for his open and secret attacks. But he could not quite feel the same towards his mother. I said that he was tied to his mother not only by his love but also by his hate, which necessitated endless placation; it was the same with the analysis—he had to go on seeing me to make sure I was not offended or injured and therefore dangerous—to make sure I was not plotting revenge against him. The patient acknowledged himself shaken by the recognition of how fantastic this was, and by the feeling that he was much worse than he had ever realized. 'I've kidded myself I was a decent chap, but really I've spent my life taking quite nice people and making them nasty.' He had allowed his hate to cancel all the good they did. But hating no longer staved off depression: he was mildly depressed all the time.

He became able to sustain and tolerate his sadness and at the same time became more aware of me as a person. He discovered, with surprise, that sadness was incompatible with embarrassment: that since he became sad all his embarrassments had disappeared. I said this was because sadness was the negation of the hostility which his embarrassment contained. Slowly emerging from his paranoid world, he realized that feeling sorry towards people relieved him of any need to fear them, and that his wife, whom he had first idealized and then made into a bad mother, was, on the whole, quite a lovable person. He acquired a garden and was amazed that things grew in it: 'I feel I don't deserve it—all these peas and things being as it were given to me, just as in the analysis, while I can't give, or at least not enough.' But intercourse with his wife was reported to be the best ever.

He found a new pleasure in singing, especially at school. It aroused friendly feelings and reminded him of his father singing while his mother played the piano. His analyst was allowed to have a good and helpful wife; good and helpful parents were allowed to be together. In consequence of this, he was able to have the feeling, for the first time, that here in the analysis we were really working together. He felt and expressed genuine grief for his objects. At the end of the summer term he said he could now see that pain was something to be accepted. Deaths and partings were inevitable, but there would always be people. There was here an indication of a new willingness to accept substitutes. Moreover, he now wanted to get from me certain qualities which he felt I had, without destroying me. That meant being equal instead of being hostile.

During the summer holiday his son was born. His feelings toward the child were predominantly tolerant and protective. He liked to watch him feeding at the breast and felt that he could now relinquish his own demand for the breast and for analysis. In a slip of the tongue he referred to 'sweet aloes'. I interpreted the relief he felt in being weaned by me. He could let his tears come now because I was no longer an enemy. He said, 'I used to hate your guts: I hope your guts are all right.'

Meanwhile, the mackintosh had not been forgotten. A great deal of work had been done on its relations to the penis and breast, to the female genital and to his lost foreskin; but that is too complex to quote here. The function of mackintoshes in his sex life was now a vestigial one only: most of the time he would no longer notice them, but in situations of marked deprivation he would get a transient satisfaction from looking at them, passing in the street, undisturbed by guilt or by any impulse to follow them.

One day in October he told me of a dream in which he was having an erection but his penis was held down by his own pubic hairs. In the waiting-room he noticed a 'cocky' young man and thought, 'I've really come here to find my penis; perhaps others come to lose a bit.' On the way he had seen a woman in a mackintosh which from a distance looked particularly smooth and shiny, but when she drew nearer he saw lines in it. It was as if it represented a penis and instead of being very erect it was flaccid. He felt himself deflated. I commented on his secret admiration of the erect penis as something seldom admitted to in the analysis. He confirmed that he secretly admired his own, but thought of it as something not really part of him, semi-independent, over which he had only a limited control—an aggressive ruthless thing—there was no knowwhat it might not do if given the chance—going around fucking women and knocking people about generally. There was a part of himself which would still prefer to look at macs. I interpreted the projection of his own erect penis into the tall erect woman in the smooth and shining mac and the defence it served—not merely against the threat of having it cut off but also against fear of the damage it might do: he wanted to protect the people he loved from these forces in himself which he felt to be so enormously potent and destructive. Further material led to the interpretation that he could not allow himself a better sexuality than he felt his parents had had, and hence could seldom allow himself any success which would surpass his father's. He confirmed this, saying that he took care to avoid finding out whether or not he earned more than his father. This was interpreted as a defence against overwhelming greed, which had wanted to rob his parents of everything they had. The patient then recognized effectively for the first time that being potent had always meant stealing his father's penis, or later his analyst's. The erect penis had to be placed outside because it was stolen.

In this weaning phase of the analysis the patient took on various new activities and found a new capacity to cope with work and people. His relations with his headmaster, colleagues, and pupils became easier and more human: he could even make the children laugh while the Head was in the room. In teaching he could give more freely, and was surprised at the children's capacity to digest what he gave them. Though he spoke of looking for a better job, he added that he would not be ready for that until he had contributed all he could to this one. Colleagues had long been urging him to apply for headships, and now at last he could begin to think of doing so without feeling apologetic about it. I said he was telling me he could move towards equality without feeling threatened—a reflection of his changing attitude to me. He said, 'I want to try myself out and see how far I can go.' All this seemed to me to represent a genuine achievement of potency. He could now feel secure in the use of his penis. It was no longer stolen.

The closing sessions centred upon what Freud has described as one of the strongest transference resistances, namely, the patient's reluctance to feel indebted to his analyst. But in this case the principal conflict echoed was the conflict with the mother. With her, defiance was the only independence he had known. He had been trying all his life to prove that she had not 'made a good job of him', and to have her 'taking credit' for his male achievements would re-establish her control. Now he was reluctant to give me, as he said, a feather in my cap. He reverted to his grumbling and for some days made me uneasy about the outcome.

The final change came with the discovery that I was prepared to accept failure in the analysis, if need be, and not become hostile. This disarmed him. In the last hour he said, 'You are a human being and I've grown fond of you. I kept up my hostile attitude almost to the end, but now I feel I shan't any more.' He felt sorry because it had been hard on me, and wondered if my next patient would be as obdurate. He said, 'I never really thought you could deal with me, except by making the analysis permanent.'

He could now accept and express the pain of parting. Hitherto he had feared, as in childhood,

that his sadness would not be accepted, that his sorrow would be used by me as an occasion for triumph. Now he knew there would be no triumph, because he himself had given up his wish to triumph over me. He could make full acknowledgements, deeply felt, of what he had received from analysis.

The patient had relinquished his grudge. He said, 'Now I can feel tenderness, even these aloof women become human; and if I can sustain this tender feeling, what remains of the mac will go.' At home he was manifestly accepting the responsibilities of husband and father. In work, he said, he would now feel free to go all out for his goals. Competing no longer meant hating, because failure would not bring despair.

I am keenly aware of the limitations of this analysis: almost every page of the notes reveals some failure of understanding or opportunity missed. Yet in the later sessions I think one can hear the patient speaking with a different voice. The criteria for termination discussed in this Society by John Rickman and Melanie Klein, among others, have not, perhaps, gone wholly unfulfilled.

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